

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 100 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$44,477,000	\$37,123,000	(\$7,354,000)	-17%
2	Short Term Investments	\$17,550,000	\$18,455,000	\$905,000	5%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$29,146,000	\$41,819,000	\$12,673,000	43%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$1,411,000	\$2,403,000	\$992,000	70%
7	Inventories of Supplies	\$3,852,000	\$3,786,000	(\$66,000)	-2%
8	Prepaid Expenses	\$1,876,000	\$2,516,000	\$640,000	34%
9	Other Current Assets	\$3,107,000	\$5,701,000	\$2,594,000	83%
	Total Current Assets	\$101,419,000	\$111,803,000	\$10,384,000	10%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$0	\$0	\$0	0%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$5,788,000	\$5,788,000	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$5,788,000	\$5,788,000	\$0	0%
5	Interest in Net Assets of Foundation	\$45,642,000	\$48,588,000	\$2,946,000	6%
6	Long Term Investments	\$20,564,000	\$20,685,000	\$121,000	1%
7	Other Noncurrent Assets	\$7,995,000	\$17,502,000	\$9,507,000	119%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$360,747,000	\$370,486,000	\$9,739,000	3%
2	Less: Accumulated Depreciation	\$248,840,000	\$264,952,000	\$16,112,000	6%
	Property, Plant and Equipment, Net	\$111,907,000	\$105,534,000	(\$6,373,000)	-6%
3	Construction in Progress	\$4,946,000	\$18,530,000	\$13,584,000	275%
	Total Net Fixed Assets	\$116,853,000	\$124,064,000	\$7,211,000	6%
	Total Assets	\$298,261,000	\$328,430,000	\$30,169,000	10%

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<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$11,257,000	\$13,294,000	\$2,037,000	18%
2	Salaries, Wages and Payroll Taxes	\$34,944,000	\$41,298,000	\$6,354,000	18%
3	Due To Third Party Payers	\$2,857,000	\$3,987,000	\$1,130,000	40%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,945,000	\$3,832,000	\$887,000	30%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$52,003,000	\$62,411,000	\$10,408,000	20%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$47,145,000	\$49,757,000	\$2,612,000	6%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$47,145,000	\$49,757,000	\$2,612,000	6%
3	Accrued Pension Liability	\$49,237,000	\$51,983,000	\$2,746,000	6%
4	Other Long Term Liabilities	\$46,777,000	\$45,465,000	(\$1,312,000)	-3%
	Total Long Term Liabilities	\$143,159,000	\$147,205,000	\$4,046,000	3%
5	Interest in Net Assets of Affiliates or Joint Ventures	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$62,529,000	\$74,736,000	\$12,207,000	20%
2	Temporarily Restricted Net Assets	\$23,262,000	\$24,997,000	\$1,735,000	7%
3	Permanently Restricted Net Assets	\$17,308,000	\$19,081,000	\$1,773,000	10%
	Total Net Assets	\$103,099,000	\$118,814,000	\$15,715,000	15%
	Total Liabilities and Net Assets	\$298,261,000	\$328,430,000	\$30,169,000	10%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 150 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,185,590,000	\$1,300,540,000	\$114,950,000	10%
2	Less: Allowances	\$802,426,000	\$851,787,000	\$49,361,000	6%
3	Less: Charity Care	\$24,102,000	\$29,578,000	\$5,476,000	23%
4	Less: Other Deductions	\$0	\$9,560,000	\$9,560,000	0%
	Total Net Patient Revenue	\$359,062,000	\$409,615,000	\$50,553,000	14%
5	Other Operating Revenue	\$5,877,000	\$5,876,000	(\$1,000)	0%
6	Net Assets Released from Restrictions	\$1,077,000	\$1,831,000	\$754,000	70%
	Total Operating Revenue	\$366,016,000	\$417,322,000	\$51,306,000	14%
B. Operating Expenses:					
1	Salaries and Wages	\$128,883,000	\$140,185,000	\$11,302,000	9%
2	Fringe Benefits	\$41,808,000	\$46,983,000	\$5,175,000	12%
3	Physicians Fees	\$14,462,000	\$18,061,000	\$3,599,000	25%
4	Supplies and Drugs	\$45,672,000	\$46,888,000	\$1,216,000	3%
5	Depreciation and Amortization	\$17,768,000	\$17,879,000	\$111,000	1%
6	Bad Debts	\$13,505,000	\$12,302,000	(\$1,203,000)	-9%
7	Interest	\$3,059,000	\$3,110,000	\$51,000	2%
8	Malpractice	\$8,342,000	\$5,829,000	(\$2,513,000)	-30%
9	Other Operating Expenses	\$76,716,000	\$92,041,000	\$15,325,000	20%
	Total Operating Expenses	\$350,215,000	\$383,278,000	\$33,063,000	9%
	Income/(Loss) From Operations	\$15,801,000	\$34,044,000	\$18,243,000	115%
C. Non-Operating Revenue:					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$1,226,000	\$379,000	(\$847,000)	-69%
	Total Non-Operating Revenue	\$1,226,000	\$379,000	(\$847,000)	-69%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$17,027,000	\$34,423,000	\$17,396,000	102%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$540,000	(\$417,000)	(\$957,000)	-177%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$540,000	(\$417,000)	(\$957,000)	-177%
	Excess/(Deficiency) of Revenue Over Expenses	\$17,567,000	\$34,006,000	\$16,439,000	94%
	Principal Payments	\$2,785,000	\$2,945,000	\$160,000	6%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. GROSS REVENUE BY PAYER					
A. INPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$244,031,637	\$256,830,518	\$12,798,881	5%
2	MEDICARE MANAGED CARE	\$103,587,801	\$99,011,240	(\$4,576,561)	-4%
3	MEDICAID	\$90,725,755	\$118,040,849	\$27,315,094	30%
4	MEDICAID MANAGED CARE	\$61,214,692	\$59,941,883	(\$1,272,809)	-2%
5	CHAMPUS/TRICARE	\$780,040	\$822,407	\$42,367	5%
6	COMMERCIAL INSURANCE	\$78,896,744	\$85,892,978	\$6,996,234	9%
7	NON-GOVERNMENT MANAGED CARE	\$98,728,081	\$108,575,086	\$9,847,005	10%
8	WORKER'S COMPENSATION	\$8,832,931	\$9,061,272	\$228,341	3%
9	SELF- PAY/UNINSURED	\$9,670,822	\$9,870,815	\$199,993	2%
10	SAGA	\$15,148,822	\$0	(\$15,148,822)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL INPATIENT GROSS REVENUE	\$711,617,325	\$748,047,048	\$36,429,723	5%
B. OUTPATIENT GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$82,290,563	\$101,413,467	\$19,122,904	23%
2	MEDICARE MANAGED CARE	\$37,622,903	\$44,340,109	\$6,717,206	18%
3	MEDICAID	\$48,101,663	\$67,983,044	\$19,881,381	41%
4	MEDICAID MANAGED CARE	\$81,346,080	\$90,463,084	\$9,117,004	11%
5	CHAMPUS/TRICARE	\$680,630	\$1,057,263	\$376,633	55%
6	COMMERCIAL INSURANCE	\$75,891,004	\$95,032,127	\$19,141,123	25%
7	NON-GOVERNMENT MANAGED CARE	\$97,677,450	\$113,733,554	\$16,056,104	16%
8	WORKER'S COMPENSATION	\$4,618,967	\$5,326,638	\$707,671	15%
9	SELF- PAY/UNINSURED	\$30,889,642	\$33,143,267	\$2,253,625	7%
10	SAGA	\$14,853,469	\$0	(\$14,853,469)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT GROSS REVENUE	\$473,972,371	\$552,492,553	\$78,520,182	17%
C. TOTAL GROSS REVENUE					
1	MEDICARE TRADITIONAL	\$326,322,200	\$358,243,985	\$31,921,785	10%
2	MEDICARE MANAGED CARE	\$141,210,704	\$143,351,349	\$2,140,645	2%
3	MEDICAID	\$138,827,418	\$186,023,893	\$47,196,475	34%
4	MEDICAID MANAGED CARE	\$142,560,772	\$150,404,967	\$7,844,195	6%
5	CHAMPUS/TRICARE	\$1,460,670	\$1,879,670	\$419,000	29%
6	COMMERCIAL INSURANCE	\$154,787,748	\$180,925,105	\$26,137,357	17%
7	NON-GOVERNMENT MANAGED CARE	\$196,405,531	\$222,308,640	\$25,903,109	13%
8	WORKER'S COMPENSATION	\$13,451,898	\$14,387,910	\$936,012	7%
9	SELF- PAY/UNINSURED	\$40,560,464	\$43,014,082	\$2,453,618	6%
10	SAGA	\$30,002,291	\$0	(\$30,002,291)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL GROSS REVENUE	\$1,185,589,696	\$1,300,539,601	\$114,949,905	10%
II. NET REVENUE BY PAYER					
A. INPATIENT NET REVENUE					
1	MEDICARE TRADITIONAL	\$78,311,274	\$88,033,718	\$9,722,444	12%
2	MEDICARE MANAGED CARE	\$30,728,337	\$28,656,812	(\$2,071,525)	-7%
3	MEDICAID	\$23,730,071	\$33,310,439	\$9,580,368	40%
4	MEDICAID MANAGED CARE	\$13,020,809	\$12,619,480	(\$401,329)	-3%
5	CHAMPUS/TRICARE	\$83,456	\$162,598	\$79,142	95%
6	COMMERCIAL INSURANCE	\$34,200,650	\$38,441,097	\$4,240,447	12%
7	NON-GOVERNMENT MANAGED CARE	\$42,146,897	\$45,583,877	\$3,436,980	8%
8	WORKER'S COMPENSATION	\$8,837,793	\$8,970,365	\$132,572	2%
9	SELF- PAY/UNINSURED	\$952,380	\$2,770,737	\$1,818,357	191%
10	SAGA	\$1,559,167	\$0	(\$1,559,167)	-100%
11	OTHER	\$0	\$0	\$0	0%

**BRIDGEPORT HOSPITAL
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FISCAL YEAR 2011
REPORT 165 - HOSPITAL GROSS REVENUE, NET REVENUE AND STATISTICS BY PAYER**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
	TOTAL INPATIENT NET REVENUE	\$233,570,834	\$258,549,123	\$24,978,289	11%
B.	OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$13,964,942	\$17,621,583	\$3,656,641	26%
2	MEDICARE MANAGED CARE	\$8,042,380	\$10,039,772	\$1,997,392	25%
3	MEDICAID	\$8,223,627	\$10,188,015	\$1,964,388	24%
4	MEDICAID MANAGED CARE	\$14,389,691	\$16,863,418	\$2,473,727	17%
5	CHAMPUS/TRICARE	\$169,111	\$208,130	\$39,019	23%
6	COMMERCIAL INSURANCE	\$27,749,054	\$36,262,117	\$8,513,063	31%
7	NON-GOVERNMENT MANAGED CARE	\$31,825,158	\$42,502,347	\$10,677,189	34%
8	WORKER'S COMPENSATION	\$4,623,531	\$5,272,823	\$649,292	14%
9	SELF- PAY/UNINSURED	\$2,336,439	\$2,427,657	\$91,218	4%
10	SAGA	\$1,456,241	\$0	(\$1,456,241)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL OUTPATIENT NET REVENUE	\$112,780,174	\$141,385,862	\$28,605,688	25%
C.	TOTAL NET REVENUE				
1	MEDICARE TRADITIONAL	\$92,276,216	\$105,655,301	\$13,379,085	14%
2	MEDICARE MANAGED CARE	\$38,770,717	\$38,696,584	(\$74,133)	0%
3	MEDICAID	\$31,953,698	\$43,498,454	\$11,544,756	36%
4	MEDICAID MANAGED CARE	\$27,410,500	\$29,482,898	\$2,072,398	8%
5	CHAMPUS/TRICARE	\$252,567	\$370,728	\$118,161	47%
6	COMMERCIAL INSURANCE	\$61,949,704	\$74,703,214	\$12,753,510	21%
7	NON-GOVERNMENT MANAGED CARE	\$73,972,055	\$88,086,224	\$14,114,169	19%
8	WORKER'S COMPENSATION	\$13,461,324	\$14,243,188	\$781,864	6%
9	SELF- PAY/UNINSURED	\$3,288,819	\$5,198,394	\$1,909,575	58%
10	SAGA	\$3,015,408	\$0	(\$3,015,408)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL NET REVENUE	\$346,351,008	\$399,934,985	\$53,583,977	15%
III.	STATISTICS BY PAYER				
A.	DISCHARGES				
1	MEDICARE TRADITIONAL	4,868	4,903	35	1%
2	MEDICARE MANAGED CARE	2,069	2,029	(40)	-2%
3	MEDICAID	2,370	3,097	727	31%
4	MEDICAID MANAGED CARE	2,896	2,907	11	0%
5	CHAMPUS/TRICARE	28	33	5	18%
6	COMMERCIAL INSURANCE	2,624	2,538	(86)	-3%
7	NON-GOVERNMENT MANAGED CARE	3,305	3,136	(169)	-5%
8	WORKER'S COMPENSATION	167	153	(14)	-8%
9	SELF- PAY/UNINSURED	311	262	(49)	-16%
10	SAGA	406	0	(406)	-100%
11	OTHER	0	0	0	0%
	TOTAL DISCHARGES	19,044	19,058	14	0%
B.	PATIENT DAYS				
1	MEDICARE TRADITIONAL	37,857	37,718	(139)	0%
2	MEDICARE MANAGED CARE	14,522	13,621	(901)	-6%
3	MEDICAID	15,060	17,984	2,924	19%
4	MEDICAID MANAGED CARE	10,093	9,126	(967)	-10%
5	CHAMPUS/TRICARE	116	126	10	9%
6	COMMERCIAL INSURANCE	10,212	10,601	389	4%
7	NON-GOVERNMENT MANAGED CARE	12,773	13,129	356	3%
8	WORKER'S COMPENSATION	636	684	48	8%
9	SELF- PAY/UNINSURED	1,212	1,106	(106)	-9%
10	SAGA	2,248	0	(2,248)	-100%
11	OTHER	0	0	0	0%
	TOTAL PATIENT DAYS	104,729	104,095	(634)	-1%
C.	OUTPATIENT VISITS				

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(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
1	MEDICARE TRADITIONAL	24,459	29,971	5,512	23%
2	MEDICARE MANAGED CARE	9,862	11,973	2,111	21%
3	MEDICAID	22,793	32,218	9,425	41%
4	MEDICAID MANAGED CARE	50,374	53,160	2,786	6%
5	CHAMPUS/TRICARE	374	470	96	26%
6	COMMERCIAL INSURANCE	29,209	35,557	6,348	22%
7	NON-GOVERNMENT MANAGED CARE	34,404	38,887	4,483	13%
8	WORKER'S COMPENSATION	1,553	1,602	49	3%
9	SELF- PAY/UNINSURED	15,803	15,389	(414)	-3%
10	SAGA	7,396	0	(7,396)	-100%
11	OTHER	0	0	0	0%
	TOTAL OUTPATIENT VISITS	196,227	219,227	23,000	12%
IV.	EMERGENCY DEPARTMENT OUTPATIENT BY PAYER				
A.	EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE				
1	MEDICARE TRADITIONAL	\$17,789,653	\$17,179,648	(\$610,005)	-3%
2	MEDICARE MANAGED CARE	\$6,719,722	\$7,485,613	\$765,891	11%
3	MEDICAID	\$18,838,089	\$30,562,757	\$11,724,668	62%
4	MEDICAID MANAGED CARE	\$34,626,028	\$39,474,865	\$4,848,837	14%
5	CHAMPUS/TRICARE	\$284,135	\$365,808	\$81,673	29%
6	COMMERCIAL INSURANCE	\$17,002,207	\$19,508,899	\$2,506,692	15%
7	NON-GOVERNMENT MANAGED CARE	\$20,912,229	\$20,378,042	(\$534,187)	-3%
8	WORKER'S COMPENSATION	\$1,203,800	\$1,237,730	\$33,930	3%
9	SELF- PAY/UNINSURED	\$20,310,905	\$20,087,925	(\$222,980)	-1%
10	SAGA	\$7,330,349	\$0	(\$7,330,349)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT GROSS REVENUE	\$145,017,117	\$156,281,287	\$11,264,170	8%
B.	EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE				
1	MEDICARE TRADITIONAL	\$3,316,113	\$3,605,343	\$289,230	9%
2	MEDICARE MANAGED CARE	\$1,464,913	\$1,701,626	\$236,713	16%
3	MEDICAID	\$2,845,746	\$4,392,749	\$1,547,003	54%
4	MEDICAID MANAGED CARE	\$5,688,330	\$6,462,234	\$773,904	14%
5	CHAMPUS/TRICARE	\$88,084	\$74,870	(\$13,214)	-15%
6	COMMERCIAL INSURANCE	\$6,156,536	\$8,475,107	\$2,318,571	38%
7	NON-GOVERNMENT MANAGED CARE	\$7,380,352	\$7,820,641	\$440,289	6%
8	WORKER'S COMPENSATION	\$772,778	\$836,101	\$63,323	8%
9	SELF- PAY/UNINSURED	\$20,140,318	\$19,918,935	(\$221,383)	-1%
10	SAGA	\$786,338	\$0	(\$786,338)	-100%
11	OTHER	\$0	\$0	\$0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT NET REVENUE	\$48,639,508	\$53,287,606	\$4,648,098	10%
C.	EMERGENCY DEPARTMENT OUTPATIENT VISITS				
1	MEDICARE TRADITIONAL	5,647	5,759	112	2%
2	MEDICARE MANAGED CARE	1,905	2,048	143	8%
3	MEDICAID	8,558	12,579	4,021	47%
4	MEDICAID MANAGED CARE	20,600	21,177	577	3%
5	CHAMPUS/TRICARE	148	176	28	19%
6	COMMERCIAL INSURANCE	6,750	7,289	539	8%
7	NON-GOVERNMENT MANAGED CARE	8,231	7,520	(711)	-9%
8	WORKER'S COMPENSATION	527	510	(17)	-3%
9	SELF- PAY/UNINSURED	9,342	8,612	(730)	-8%
10	SAGA	3,304	0	(3,304)	-100%
11	OTHER	0	0	0	0%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	65,012	65,670	658	1%

BRIDGEPORT HOSPITAL
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REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
I. OPERATING EXPENSE BY CATEGORY					
A. Salaries & Wages:					
1	Nursing Salaries	\$48,504,672	\$50,710,790	\$2,206,118	5%
2	Physician Salaries	\$9,466,788	\$13,924,825	\$4,458,037	47%
3	Non-Nursing, Non-Physician Salaries	\$70,911,540	\$75,549,385	\$4,637,845	7%
	Total Salaries & Wages	\$128,883,000	\$140,185,000	\$11,302,000	9%
B. Fringe Benefits:					
1	Nursing Fringe Benefits	\$11,454,118	\$11,626,907	\$172,789	2%
2	Physician Fringe Benefits	\$2,213,435	\$955,279	(\$1,258,156)	-57%
3	Non-Nursing, Non-Physician Fringe Benefits	\$28,140,447	\$34,400,814	\$6,260,367	22%
	Total Fringe Benefits	\$41,808,000	\$46,983,000	\$5,175,000	12%
C. Contractual Labor Fees:					
1	Nursing Fees	\$1,993,281	\$2,016,396	\$23,115	1%
2	Physician Fees	\$14,462,000	\$18,061,000	\$3,599,000	25%
3	Non-Nursing, Non-Physician Fees	\$22,402,736	\$29,282,200	\$6,879,464	31%
	Total Contractual Labor Fees	\$38,858,017	\$49,359,596	\$10,501,579	27%
D. Medical Supplies and Pharmaceutical Cost:					
1	Medical Supplies	\$35,893,000	\$36,788,000	\$895,000	2%
2	Pharmaceutical Costs	\$9,779,000	\$10,100,000	\$321,000	3%
	Total Medical Supplies and Pharmaceutical Cost	\$45,672,000	\$46,888,000	\$1,216,000	3%
E. Depreciation and Amortization:					
1	Depreciation-Building	\$9,244,000	\$9,302,000	\$58,000	1%
2	Depreciation-Equipment	\$8,524,000	\$8,577,000	\$53,000	1%
3	Amortization	\$0	\$0	\$0	0%
	Total Depreciation and Amortization	\$17,768,000	\$17,879,000	\$111,000	1%
F. Bad Debts:					
1	Bad Debts	\$13,505,000	\$12,302,000	(\$1,203,000)	-9%
G. Interest Expense:					
1	Interest Expense	\$3,059,000	\$3,110,000	\$51,000	2%
H. Malpractice Insurance Cost:					
1	Malpractice Insurance Cost	\$8,342,000	\$5,829,000	(\$2,513,000)	-30%
I. Utilities:					
1	Water	\$287,513	\$311,206	\$23,693	8%
2	Natural Gas	\$1,531,639	\$1,487,845	(\$43,794)	-3%
3	Oil	\$0	\$0	\$0	0%
4	Electricity	\$3,762,757	\$3,654,234	(\$108,523)	-3%
5	Telephone	\$487,180	\$467,854	(\$19,326)	-4%
6	Other Utilities	\$19,436	\$206,584	\$187,148	963%
	Total Utilities	\$6,088,525	\$6,127,723	\$39,198	1%
J. Business Expenses:					
1	Accounting Fees	\$344,693	\$355,029	\$10,336	3%
2	Legal Fees	\$1,454,019	\$740,953	(\$713,066)	-49%
3	Consulting Fees	\$1,302,117	\$2,788,028	\$1,485,911	114%
4	Dues and Membership	\$669,740	\$600,819	(\$68,921)	-10%
5	Equipment Leases	\$129,773	\$246,363	\$116,590	90%
6	Building Leases	\$1,468,896	\$1,778,941	\$310,045	21%
7	Repairs and Maintenance	\$8,535,506	\$9,161,504	\$625,998	7%
8	Insurance	\$763,709	\$754,417	(\$9,292)	-1%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1) LINE	(2) DESCRIPTION	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Travel	\$250,647	\$378,817	\$128,170	51%
10	Conferences	\$11,419	\$0	(\$11,419)	-100%
11	Property Tax	\$179,547	\$172,967	(\$6,580)	-4%
12	General Supplies	\$6,601,591	\$5,117,857	(\$1,483,734)	-22%
13	Licenses and Subscriptions	\$377,826	\$375,598	(\$2,228)	-1%
14	Postage and Shipping	\$561,611	\$621,521	\$59,910	11%
15	Advertising	\$0	\$0	\$0	0%
16	Other Business Expenses	\$10,928,179	\$18,119,535	\$7,191,356	66%
	Total Business Expenses	\$33,579,273	\$41,212,349	\$7,633,076	23%
K.	Other Operating Expense:				
1	Miscellaneous Other Operating Expenses	\$12,652,185	\$13,402,332	\$750,147	6%
	Total Operating Expenses - All Expense Categories*	\$350,215,000	\$383,278,000	\$33,063,000	9%
	*A.- K. The total operating expenses amount above must agree with the total operating expenses amount on Report 150				
II.	OPERATING EXPENSE BY DEPARTMENT				
A.	General Services:				
1	General Administration	\$24,809,451	\$25,691,212	\$881,761	4%
2	General Accounting	\$2,309,585	\$2,635,628	\$326,043	14%
3	Patient Billing & Collection	\$7,283,930	\$7,732,705	\$448,775	6%
4	Admitting / Registration Office	\$1,052,014	\$1,210,004	\$157,990	15%
5	Data Processing	\$6,730,447	\$8,946,616	\$2,216,169	33%
6	Communications	\$0	\$0	\$0	0%
7	Personnel	\$43,072,329	\$48,433,310	\$5,360,981	12%
8	Public Relations	\$5,278	\$15,108	\$9,830	186%
9	Purchasing	\$702,838	\$849,910	\$147,072	21%
10	Dietary and Cafeteria	\$3,878,840	\$4,323,659	\$444,819	11%
11	Housekeeping	\$3,343,629	\$3,915,297	\$571,668	17%
12	Laundry & Linen	\$0	\$0	\$0	0%
13	Operation of Plant	\$5,345,701	\$5,260,163	(\$85,538)	-2%
14	Security	\$1,727,240	\$1,895,532	\$168,292	10%
15	Repairs and Maintenance	\$5,310,277	\$5,667,788	\$357,511	7%
16	Central Sterile Supply	\$2,292,223	\$2,261,521	(\$30,702)	-1%
17	Pharmacy Department	\$12,697,313	\$12,986,135	\$288,822	2%
18	Other General Services	\$34,831,818	\$63,335,536	\$28,503,718	82%
	Total General Services	\$155,392,913	\$195,160,124	\$39,767,211	26%
B.	Professional Services:				
1	Medical Care Administration	\$0	\$0	\$0	0%
2	Residency Program	\$0	\$0	\$0	0%
3	Nursing Services Administration	\$2,785,943	\$3,511,414	\$725,471	26%
4	Medical Records	\$2,750,924	\$2,811,035	\$60,111	2%
5	Social Service	\$2,392,870	\$2,553,208	\$160,338	7%
6	Other Professional Services	\$0	\$0	\$0	0%
	Total Professional Services	\$7,929,737	\$8,875,657	\$945,920	12%
C.	Special Services:				
1	Operating Room	\$22,626,350	\$23,303,424	\$677,074	3%
2	Recovery Room	\$1,490,518	\$1,506,213	\$15,695	1%
3	Anesthesiology	\$2,090,207	\$1,875,331	(\$214,876)	-10%
4	Delivery Room	\$3,758,394	\$4,083,718	\$325,324	9%
5	Diagnostic Radiology	\$5,062,625	\$5,476,004	\$413,379	8%
6	Diagnostic Ultrasound	\$1,181,133	\$1,367,569	\$186,436	16%
7	Radiation Therapy	\$3,490,957	\$3,416,873	(\$74,084)	-2%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 175 - HOSPITAL OPERATING EXPENSES BY EXPENSE CATEGORY AND DEPARTMENT

(1)	(2)	(3)	(4)	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>FY 2010 ACTUAL</u>	<u>FY 2011 ACTUAL</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
8	Radioisotopes	\$752,522	\$789,761	\$37,239	5%
9	CT Scan	\$1,003,518	\$1,266,493	\$262,975	26%
10	Laboratory	\$11,680,412	\$12,519,831	\$839,419	7%
11	Blood Storing/Processing	\$0	\$0	\$0	0%
12	Cardiology	\$9,612,376	\$11,881,744	\$2,269,368	24%
13	Electrocardiology	\$1,378,621	\$1,214,650	(\$163,971)	-12%
14	Electroencephalography	\$124,038	\$128,266	\$4,228	3%
15	Occupational Therapy	\$0	\$0	\$0	0%
16	Speech Pathology	\$0	\$0	\$0	0%
17	Audiology	\$0	\$0	\$0	0%
18	Respiratory Therapy	\$2,570,754	\$2,862,146	\$291,392	11%
19	Pulmonary Function	\$260,442	\$411,175	\$150,733	58%
20	Intravenous Therapy	\$0	\$0	\$0	0%
21	Shock Therapy	\$0	\$0	\$0	0%
22	Psychiatry / Psychology Services	\$1,791,128	\$1,788,992	(\$2,136)	0%
23	Renal Dialysis	\$640,297	\$785,146	\$144,849	23%
24	Emergency Room	\$14,689,443	\$17,034,981	\$2,345,538	16%
25	MRI	\$0	\$0	\$0	0%
26	PET Scan	\$213,512	\$214,162	\$650	0%
27	PET/CT Scan	\$0	\$0	\$0	0%
28	Endoscopy	\$2,379,780	\$2,613,058	\$233,278	10%
29	Sleep Center	\$0	\$0	\$0	0%
30	Lithotripsy	\$0	\$0	\$0	0%
31	Cardiac Catheterization/Rehabilitation	\$0	\$0	\$0	0%
32	Occupational Therapy / Physical Therapy	\$5,228,034	\$4,873,521	(\$354,513)	-7%
33	Dental Clinic	\$0	\$0	\$0	0%
34	Other Special Services	\$0	\$0	\$0	0%
	Total Special Services	\$92,025,061	\$99,413,058	\$7,387,997	8%
D.	<u>Routine Services:</u>				
1	Medical & Surgical Units	\$37,832,678	\$40,131,537	\$2,298,859	6%
2	Intensive Care Unit	\$3,288,620	\$3,203,594	(\$85,026)	-3%
3	Coronary Care Unit	\$0	\$0	\$0	0%
4	Psychiatric Unit	\$2,133,117	\$2,191,717	\$58,600	3%
5	Pediatric Unit	\$0	\$0	\$0	0%
6	Maternity Unit	\$0	\$0	\$0	0%
7	Newborn Nursery Unit	\$0	\$0	\$0	0%
8	Neonatal ICU	\$2,392,263	\$2,326,709	(\$65,554)	-3%
9	Rehabilitation Unit	\$1,422,317	\$1,789,038	\$366,721	26%
10	Ambulatory Surgery	\$8,425,936	\$9,080,048	\$654,112	8%
11	Home Care	\$0	\$0	\$0	0%
12	Outpatient Clinics	\$2,091,121	\$2,233,976	\$142,855	7%
13	Other Routine Services	\$1,925,662	\$2,287,015	\$361,353	19%
	Total Routine Services	\$59,511,714	\$63,243,634	\$3,731,920	6%
E.	<u>Other Departments:</u>				
1	Miscellaneous Other Departments	\$35,355,575	\$16,585,527	(\$18,770,048)	-53%
	Total Operating Expenses - All Departments*	\$350,215,000	\$383,278,000	\$33,063,000	9%
	*A.- 0. The total operating expenses amount above must agree with the total operating expenses amount on Report 150.				

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
A. <u>Statement of Operations Summary</u>				
1	Total Net Patient Revenue	\$349,484,000	\$ 359,062,000	\$409,615,000
2	Other Operating Revenue	6,311,000	6,954,000	7,707,000
3	Total Operating Revenue	\$355,795,000	\$366,016,000	\$417,322,000
4	Total Operating Expenses	351,055,000	350,215,000	383,278,000
5	Income/(Loss) From Operations	\$4,740,000	\$15,801,000	\$34,044,000
6	Total Non-Operating Revenue	(3,150,000)	1,766,000	(38,000)
7	Excess/(Deficiency) of Revenue Over Expenses	\$1,590,000	\$17,567,000	\$34,006,000
B. <u>Profitability Summary</u>				
1	Hospital Operating Margin	1.34%	4.30%	8.16%
2	Hospital Non Operating Margin	-0.89%	0.48%	-0.01%
3	Hospital Total Margin	0.45%	4.78%	8.15%
4	Income/(Loss) From Operations	\$4,740,000	\$15,801,000	\$34,044,000
5	Total Operating Revenue	\$355,795,000	\$366,016,000	\$417,322,000
6	Total Non-Operating Revenue	(\$3,150,000)	\$1,766,000	(\$38,000)
7	Total Revenue	\$352,645,000	\$367,782,000	\$417,284,000
8	Excess/(Deficiency) of Revenue Over Expenses	\$1,590,000	\$17,567,000	\$34,006,000
C. <u>Net Assets Summary</u>				
1	Hospital Unrestricted Net Assets	\$49,998,000	\$62,529,000	\$74,736,000
2	Hospital Total Net Assets	\$88,852,000	\$103,099,000	\$118,814,000
3	Hospital Change in Total Net Assets	(\$59,745,000)	\$14,247,000	\$15,715,000
4	Hospital Change in Total Net Assets %	59.8%	16.0%	15.2%
D. <u>Cost Data Summary</u>				
1	Ratio of Cost to Charges	0.32	0.29	0.29
2	Total Operating Expenses	\$351,055,000	\$350,215,000	\$383,278,000
3	Total Gross Revenue	\$1,105,534,503	\$1,185,589,696	\$1,300,539,601
4	Total Other Operating Revenue	\$6,491,465	\$5,828,673	\$5,964,831
5	Private Payment to Cost Ratio	1.22	1.39	1.44
6	Total Non-Government Payments	\$140,527,189	\$152,671,902	\$182,231,020

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
7	Total Uninsured Payments	\$2,775,269	\$3,288,819	\$5,198,394
8	Total Non-Government Charges	\$402,183,381	\$405,205,641	\$460,635,737
9	Total Uninsured Charges	\$44,664,021	\$40,560,464	\$43,014,082
10	Medicare Payment to Cost Ratio	1.02	0.95	0.98
11	Total Medicare Payments	\$136,815,629	\$131,046,933	\$144,351,885
12	Total Medicare Charges	\$423,451,590	\$467,532,904	\$501,595,334
13	Medicaid Payment to Cost Ratio	0.77	0.72	0.74
14	Total Medicaid Payments	\$55,860,939	\$59,364,198	\$72,981,352
15	Total Medicaid Charges	\$228,848,426	\$281,388,190	\$336,428,860
16	Uncompensated Care Cost	\$15,245,620	\$11,054,283	\$12,285,910
17	Charity Care	\$15,999,852	\$12,024,692	\$13,664,086
18	Bad Debts	\$32,293,223	\$25,581,567	\$28,215,688
19	Total Uncompensated Care	\$48,293,075	\$37,606,259	\$41,879,774
20	Uncompensated Care % of Total Expenses	4.3%	3.2%	3.2%
21	Total Operating Expenses	\$351,055,000	\$350,215,000	\$383,278,000
E. Liquidity Measures Summary				
1	Current Ratio	1.63	1.95	1.79
2	Total Current Assets	\$75,720,000	\$101,419,000	\$111,803,000
3	Total Current Liabilities	\$46,458,000	\$52,003,000	\$62,411,000
4	Days Cash on Hand	36	68	56
5	Cash and Cash Equivalents	\$32,972,000	\$44,477,000	\$37,123,000
6	Short Term Investments	0	17,550,000	18,455,000
7	Total Cash and Short Term Investments	\$32,972,000	\$62,027,000	\$55,578,000
8	Total Operating Expenses	\$351,055,000	\$350,215,000	\$383,278,000
9	Depreciation Expense	\$18,962,000	\$17,768,000	\$17,879,000
10	Operating Expenses less Depreciation Expense	\$332,093,000	\$332,447,000	\$365,399,000
11	Days Revenue in Patient Accounts Receivable	36.15	28.16	35.85

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
12	Net Patient Accounts Receivable	\$ 33,101,000	\$ 29,146,000	\$ 41,819,000
13	Due From Third Party Payers	\$1,517,000	\$1,411,000	\$2,403,000
14	Due To Third Party Payers	\$0	\$2,857,000	\$3,987,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 34,618,000	\$ 27,700,000	\$ 40,235,000
16	Total Net Patient Revenue	\$349,484,000	\$ 359,062,000	\$ 409,615,000
17	<u>Average Payment Period</u>	51.06	57.10	62.34
18	Total Current Liabilities	\$46,458,000	\$52,003,000	\$62,411,000
19	Total Operating Expenses	\$351,055,000	\$350,215,000	\$383,278,000
20	Depreciation Expense	\$18,962,000	\$17,768,000	\$17,879,000
21	Total Operating Expenses less Depreciation Expense	\$332,093,000	\$332,447,000	\$365,399,000
F.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	32.0	34.6	36.2
2	Total Net Assets	\$88,852,000	\$103,099,000	\$118,814,000
3	Total Assets	\$277,845,000	\$298,261,000	\$328,430,000
4	<u>Cash Flow to Total Debt Ratio</u>	21.3	35.6	46.3
5	Excess/(Deficiency) of Revenues Over Expenses	\$1,590,000	\$17,567,000	\$34,006,000
6	Depreciation Expense	\$18,962,000	\$17,768,000	\$17,879,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$20,552,000	\$35,335,000	\$51,885,000
8	Total Current Liabilities	\$46,458,000	\$52,003,000	\$62,411,000
9	Total Long Term Debt	\$50,090,000	\$47,145,000	\$49,757,000
10	Total Current Liabilities and Total Long Term Debt	\$96,548,000	\$99,148,000	\$112,168,000
11	<u>Long Term Debt to Capitalization Ratio</u>	36.1	31.4	29.5
12	Total Long Term Debt	\$50,090,000	\$47,145,000	\$49,757,000
13	Total Net Assets	\$88,852,000	\$103,099,000	\$118,814,000
14	Total Long Term Debt and Total Net Assets	\$138,942,000	\$150,244,000	\$168,571,000
15	<u>Debt Service Coverage Ratio</u>	4.0	6.6	9.1
16	Excess Revenues over Expenses	\$1,590,000	\$17,567,000	\$34,006,000
17	Interest Expense	\$3,200,000	\$3,059,000	\$3,110,000
18	Depreciation and Amortization Expense	\$18,962,000	\$17,768,000	\$17,879,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL	ACTUAL	ACTUAL
		FY 2009	FY 2010	FY 2011
19	Principal Payments	\$2,795,000	\$2,785,000	\$2,945,000
G. Other Financial Ratios				
20	Average Age of Plant	13.7	14.0	14.8
21	Accumulated Depreciation	\$260,098,000	\$248,840,000	\$264,952,000
22	Depreciation and Amortization Expense	\$18,962,000	\$17,768,000	\$17,879,000
H. Utilization Measures Summary				
1	Patient Days	103,601	104,729	104,095
2	Discharges	19,808	19,044	19,058
3	ALOS	5.2	5.5	5.5
4	Staffed Beds	288	290	289
5	Available Beds	-	397	406
6	Licensed Beds	425	425	425
6	Occupancy of Staffed Beds	98.6%	98.9%	98.7%
7	Occupancy of Available Beds	75.3%	72.3%	70.2%
8	Full Time Equivalent Employees	2,039.5	2,015.4	2,085.9
I. Hospital Gross Revenue Payer Mix Percentage				
1	Non-Government Gross Revenue Payer Mix Percentage	32.3%	30.8%	32.1%
2	Medicare Gross Revenue Payer Mix Percentage	38.3%	39.4%	38.6%
3	Medicaid Gross Revenue Payer Mix Percentage	20.7%	23.7%	25.9%
4	Other Medical Assistance Gross Revenue Payer Mix Percentage	4.5%	2.5%	0.0%
5	Uninsured Gross Revenue Payer Mix Percentage	4.0%	3.4%	3.3%
6	CHAMPUS / TRICARE Gross Revenue Payer Mix Percentage	0.2%	0.1%	0.1%
7	Total Gross Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Gross Revenue (Charges)	\$357,519,360	\$364,645,177	\$417,621,655
9	Medicare Gross Revenue (Charges)	\$423,451,590	\$467,532,904	\$501,595,334
10	Medicaid Gross Revenue (Charges)	\$228,848,426	\$281,388,190	\$336,428,860
11	Other Medical Assistance Gross Revenue (Charges)	\$49,358,338	\$30,002,291	\$0
12	Uninsured Gross Revenue (Charges)	\$44,664,021	\$40,560,464	\$43,014,082
13	CHAMPUS / TRICARE Gross Revenue (Charges)	\$1,692,768	\$1,460,670	\$1,879,670
14	Total Gross Revenue (Charges)	\$1,105,534,503	\$1,185,589,696	\$1,300,539,601
J. Hospital Net Revenue Payer Mix Percentage				
1	Non-Government Net Revenue Payer Mix Percentage	40.5%	43.1%	44.3%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 185 - HOSPITAL FINANCIAL AND STATISTICAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
2	Medicare Net Revenue Payer Mix Percentage	40.2%	37.8%	36.1%
3	Medicaid Net Revenue Payer Mix Percentage	16.4%	17.1%	18.2%
4	Other Medical Assistance Net Revenue Payer Mix Percentage	1.8%	0.9%	0.0%
5	Uninsured Net Revenue Payer Mix Percentage	0.8%	0.9%	1.3%
6	CHAMPUS / TRICARE Net Revenue Payer Mix Percentage	0.1%	0.1%	0.1%
7	Total Net Revenue Payer Mix Percentage	100.0%	100.0%	100.0%
8	Non-Government Net Revenue (Payments)	\$137,751,920	\$149,383,083	\$177,032,626
9	Medicare Net Revenue (Payments)	\$136,815,629	\$131,046,933	\$144,351,885
10	Medicaid Net Revenue (Payments)	\$55,860,939	\$59,364,198	\$72,981,352
11	Other Medical Assistance Net Revenue (Payments)	\$6,240,889	\$3,015,408	\$0
12	Uninsured Net Revenue (Payments)	\$2,775,269	\$3,288,819	\$5,198,394
13	CHAMPUS / TRICARE Net Revenue Payments)	\$478,723	\$252,567	\$370,728
14	Total Net Revenue (Payments)	\$339,923,369	\$346,351,008	\$399,934,985
K. Discharges				
1	Non-Government (Including Self Pay / Uninsured)	7,016	6,407	6,089
2	Medicare	7,107	6,937	6,932
3	Medical Assistance	5,662	5,672	6,004
4	Medicaid	4,962	5,266	6,004
5	Other Medical Assistance	700	406	-
6	CHAMPUS / TRICARE	23	28	33
7	Uninsured (Included In Non-Government)	398	311	262
8	Total	19,808	19,044	19,058
L. Case Mix Index				
1	Non-Government (Including Self Pay / Uninsured)	1.137170	1.182770	1.224830
2	Medicare	1.642520	1.662250	1.612890
3	Medical Assistance	0.955779	1.018771	0.997490
4	Medicaid	0.961570	1.001910	0.997490
5	Other Medical Assistance	0.914730	1.237470	0.000000
6	CHAMPUS / TRICARE	1.427960	1.046400	0.879630
7	Uninsured (Included In Non-Government)	1.215740	1.182850	1.148760
8	Total Case Mix Index	1.266974	1.308380	1.293761
M. Emergency Department Visits				
1	Emergency Room - Treated and Admitted	10,610	10,660	11,166
2	Emergency Room - Treated and Discharged	66,812	65,012	65,670
3	Total Emergency Room Visits	77,422	75,672	76,836

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
I. MEDICARE MANAGED CARE					
A. ANTHEM - MEDICARE BLUE CONNECTICUT					
1	Inpatient Charges	\$2,201,038	\$7,523,630	\$5,322,592	242%
2	Inpatient Payments	\$439,494	\$2,016,548	\$1,577,054	359%
3	Outpatient Charges	\$943,612	\$3,153,831	\$2,210,219	234%
4	Outpatient Payments	\$327,875	\$685,364	\$357,489	109%
5	Discharges	23	142	119	517%
6	Patient Days	227	1,067	840	370%
7	Outpatient Visits (Excludes ED Visits)	151	764	613	406%
8	Emergency Department Outpatient Visits	23	100	77	335%
9	Emergency Department Inpatient Admissions	13	107	94	723%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$3,144,650	\$10,677,461	\$7,532,811	240%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$767,369	\$2,701,912	\$1,934,543	252%
B. CIGNA HEALTHCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
C. CONNECTICARE, INC.					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
D. HEALTHNET OF CONNECTICUT					
1	Inpatient Charges	\$80,142,154	\$23,785,402	(\$56,356,752)	-70%
2	Inpatient Payments	\$24,107,191	\$6,504,358	(\$17,602,833)	-73%
3	Outpatient Charges	\$28,586,100	\$7,924,714	(\$20,661,386)	-72%
4	Outpatient Payments	\$5,800,111	\$1,373,836	(\$4,426,275)	-76%
5	Discharges	1,623	448	(1,175)	-72%
6	Patient Days	11,261	3,518	(7,743)	-69%
7	Outpatient Visits (Excludes ED Visits)	5,608	1,535	(4,073)	-73%
8	Emergency Department Outpatient Visits	1,199	294	(905)	-75%
9	Emergency Department Inpatient Admissions	1,211	362	(849)	-70%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$108,728,254	\$31,710,116	(\$77,018,138)	-71%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$29,907,302	\$7,878,194	(\$22,029,108)	-74%
E. OTHER MEDICARE MANAGED CARE					
1	Inpatient Charges	\$16,427,325	\$62,567,805	\$46,140,480	281%
2	Inpatient Payments	\$4,777,446	\$18,693,890	\$13,916,444	291%
3	Outpatient Charges	\$5,732,255	\$29,963,594	\$24,231,339	423%
4	Outpatient Payments	\$1,390,204	\$7,240,373	\$5,850,169	421%
5	Discharges	304	1,325	1,021	336%
6	Patient Days	2,201	8,346	6,145	279%
7	Outpatient Visits (Excludes ED Visits)	1,368	6,656	5,288	387%
8	Emergency Department Outpatient Visits	413	1,344	931	225%
9	Emergency Department Inpatient Admissions	229	1,026	797	348%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$22,159,580	\$92,531,399	\$70,371,819	318%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,167,650	\$25,934,263	\$19,766,613	320%
F. OXFORD HEALTH PLANS, INC - MEDICARE ADVANTAGE					
1	Inpatient Charges	\$46,958	\$463,443	\$416,485	887%
2	Inpatient Payments	\$15,351	\$124,637	\$109,286	712%
3	Outpatient Charges	\$76,771	\$159,738	\$82,967	108%
4	Outpatient Payments	\$24,553	\$58,158	\$33,605	137%
5	Discharges	1	11	10	1000%
6	Patient Days	3	44	41	1367%
7	Outpatient Visits (Excludes ED Visits)	11	31	20	182%
8	Emergency Department Outpatient Visits	5	3	(2)	-40%
9	Emergency Department Inpatient Admissions	0	5	5	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$123,729	\$623,181	\$499,452	404%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$39,904	\$182,795	\$142,891	358%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
G. UNITED HEALTHCARE INSURANCE COMPANY					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
H. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$4,770,326	\$4,670,960	(\$99,366)	-2%
2	Inpatient Payments	\$1,388,855	\$1,317,379	(\$71,476)	-5%
3	Outpatient Charges	\$2,268,827	\$3,138,232	\$869,405	38%
4	Outpatient Payments	\$497,182	\$682,041	\$184,859	37%
5	Discharges	118	103	(15)	-13%
6	Patient Days	830	646	(184)	-22%
7	Outpatient Visits (Excludes ED Visits)	811	939	128	16%
8	Emergency Department Outpatient Visits	253	307	54	21%
9	Emergency Department Inpatient Admissions	102	90	(12)	-12%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$7,039,153	\$7,809,192	\$770,039	11%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$1,886,037	\$1,999,420	\$113,383	6%
I. AETNA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$15,338	\$0	(\$15,338)	-100%
4	Outpatient Payments	\$2,455	\$0	(\$2,455)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	8	0	(8)	-100%
8	Emergency Department Outpatient Visits	12	0	(12)	-100%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$15,338	\$0	(\$15,338)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$2,455	\$0	(\$2,455)	-100%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
J. HUMANA					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
K. SECURE HORIZONS					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
L. UNICARE LIFE & HEALTH INSURANCE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 200 - HOSPITAL MEDICARE MANAGED CARE ACTIVITY

(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
M. UNIVERSAL AMERICAN					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
N. EVERCARE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
II. TOTAL MEDICARE MANAGED CARE					
	TOTAL INPATIENT CHARGES	\$103,587,801	\$99,011,240	(\$4,576,561)	-4%
	TOTAL INPATIENT PAYMENTS	\$30,728,337	\$28,656,812	(\$2,071,525)	-7%
	TOTAL OUTPATIENT CHARGES	\$37,622,903	\$44,340,109	\$6,717,206	18%
	TOTAL OUTPATIENT PAYMENTS	\$8,042,380	\$10,039,772	\$1,997,392	25%
	TOTAL DISCHARGES	2,069	2,029	(40)	-2%
	TOTAL PATIENT DAYS	14,522	13,621	(901)	-6%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	7,957	9,925	1,968	25%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	1,905	2,048	143	8%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	1,555	1,590	35	2%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$141,210,704	\$143,351,349	\$2,140,645	2%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$38,770,717	\$38,696,584	(\$74,133)	0%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
I. MEDICAID MANAGED CARE					
A. ANTHEM BLUE CROSS AND BLUE SHIELD OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
B. COMMUNITY HEALTH NETWORK OF CT					
1	Inpatient Charges	\$37,186,015	\$32,612,785	(\$4,573,230)	-12%
2	Inpatient Payments	\$8,029,726	\$6,977,538	(\$1,052,188)	-13%
3	Outpatient Charges	\$49,587,736	\$53,369,672	\$3,781,936	8%
4	Outpatient Payments	\$8,821,982	\$9,935,120	\$1,113,138	13%
5	Discharges	1,684	1,615	(69)	-4%
6	Patient Days	6,255	5,098	(1,157)	-18%
7	Outpatient Visits (Excludes ED Visits)	18,074	18,610	536	3%
8	Emergency Department Outpatient Visits	12,900	12,753	(147)	-1%
9	Emergency Department Inpatient Admissions	628	593	(35)	-6%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$86,773,751	\$85,982,457	(\$791,294)	-1%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$16,851,708	\$16,912,658	\$60,950	0%
C. HEALTHNET OF THE NORTHEAST, INC.					
1	Inpatient Charges	\$10,051,212	\$12,027,156	\$1,975,944	20%
2	Inpatient Payments	\$2,043,781	\$2,321,874	\$278,093	14%
3	Outpatient Charges	\$13,086,163	\$15,208,131	\$2,121,968	16%
4	Outpatient Payments	\$2,345,714	\$2,882,658	\$536,944	23%
5	Discharges	502	501	(1)	0%
6	Patient Days	1,580	1,701	121	8%
7	Outpatient Visits (Excludes ED Visits)	4,849	5,528	679	14%
8	Emergency Department Outpatient Visits	3,159	3,408	249	8%
9	Emergency Department Inpatient Admissions	150	156	6	4%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$23,137,375	\$27,235,287	\$4,097,912	18%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$4,389,495	\$5,204,532	\$815,037	19%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
D. OTHER MEDICAID MANAGED CARE					
1	Inpatient Charges	\$640,526	\$348,980	(\$291,546)	-46%
2	Inpatient Payments	\$134,428	\$78,980	(\$55,448)	-41%
3	Outpatient Charges	\$178,808	\$239,922	\$61,114	34%
4	Outpatient Payments	\$29,325	\$37,623	\$8,298	28%
5	Discharges	27	18	(9)	-33%
6	Patient Days	94	56	(38)	-40%
7	Outpatient Visits (Excludes ED Visits)	4	12	8	200%
8	Emergency Department Outpatient Visits	100	116	16	16%
9	Emergency Department Inpatient Admissions	23	12	(11)	-48%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$819,334	\$588,902	(\$230,432)	-28%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$163,753	\$116,603	(\$47,150)	-29%
E. WELLCARE OF CONNECTICUT					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
F. FIRST CHOICE OF CONNECTICUT, PREFERRED ONE					
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$0	\$0	\$0	0%
4	Outpatient Payments	\$0	\$0	\$0	0%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	0	0	0	0%
8	Emergency Department Outpatient Visits	0	0	0	0%

BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY

(1)	(2)	(3) FY 2010 ACTUAL	(4) FY 2011 ACTUAL	(5) AMOUNT DIFFERENCE	(6) % DIFFERENCE
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$0	\$0	\$0	0%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$0	\$0	\$0	0%
	G. UNITED HEALTHCARE				
1	Inpatient Charges	\$0	\$0	\$0	0%
2	Inpatient Payments	\$0	\$0	\$0	0%
3	Outpatient Charges	\$40	\$0	(\$40)	-100%
4	Outpatient Payments	\$6	\$0	(\$6)	-100%
5	Discharges	0	0	0	0%
6	Patient Days	0	0	0	0%
7	Outpatient Visits (Excludes ED Visits)	1	0	(1)	-100%
8	Emergency Department Outpatient Visits	0	0	0	0%
9	Emergency Department Inpatient Admissions	0	0	0	0%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$40	\$0	(\$40)	-100%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6	\$0	(\$6)	-100%
	H. AETNA				
1	Inpatient Charges	\$13,336,939	\$14,952,962	\$1,616,023	12%
2	Inpatient Payments	\$2,812,874	\$3,241,088	\$428,214	15%
3	Outpatient Charges	\$18,493,333	\$21,645,359	\$3,152,026	17%
4	Outpatient Payments	\$3,192,664	\$4,008,017	\$815,353	26%
5	Discharges	683	773	90	13%
6	Patient Days	2,164	2,271	107	5%
7	Outpatient Visits (Excludes ED Visits)	6,846	7,833	987	14%
8	Emergency Department Outpatient Visits	4,441	4,900	459	10%
9	Emergency Department Inpatient Admissions	219	273	54	25%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$31,830,272	\$36,598,321	\$4,768,049	15%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$6,005,538	\$7,249,105	\$1,243,567	21%
	II. TOTAL MEDICAID MANAGED CARE				
	TOTAL INPATIENT CHARGES	\$61,214,692	\$59,941,883	(\$1,272,809)	-2%
	TOTAL INPATIENT PAYMENTS	\$13,020,809	\$12,619,480	(\$401,329)	-3%
	TOTAL OUTPATIENT CHARGES	\$81,346,080	\$90,463,084	\$9,117,004	11%
	TOTAL OUTPATIENT PAYMENTS	\$14,389,691	\$16,863,418	\$2,473,727	17%
	TOTAL DISCHARGES	2,896	2,907	11	0%
	TOTAL PATIENT DAYS	10,093	9,126	(967)	-10%
	TOTAL OUTPATIENT VISITS (EXCLUDES ED VISITS)	29,774	31,983	2,209	7%
	TOTAL EMERGENCY DEPARTMENT OUTPATIENT VISITS	20,600	21,177	577	3%
	TOTAL EMERGENCY DEPARTMENT INPATIENT ADMISSIONS	1,020	1,034	14	1%
	TOTAL INPATIENT & OUTPATIENT CHARGES	\$142,560,772	\$150,404,967	\$7,844,195	6%
	TOTAL INPATIENT & OUTPATIENT PAYMENTS	\$27,410,500	\$29,482,898	\$2,072,398	8%

**BRIDGEPORT HOSPITAL
TWELVE MONTHS ACTUAL FILING
FISCAL YEAR 2011
REPORT 250 - HOSPITAL MEDICAID MANAGED CARE ACTIVITY**

(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
		FY 2010	FY 2011	AMOUNT	%
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL</u>	<u>ACTUAL</u>	<u>DIFFERENCE</u>	<u>DIFFERENCE</u>
I.	ASSETS				
A.	Current Assets:				
1	Cash and Cash Equivalents	\$45,152,000	\$37,449,000	(\$7,703,000)	-17%
2	Short Term Investments	\$42,391,000	\$43,693,000	\$1,302,000	3%
3	Accounts Receivable (Less: Allowance for Doubtful Accounts)	\$29,146,000	\$41,819,000	\$12,673,000	43%
4	Current Assets Whose Use is Limited for Current Liabilities	\$0	\$0	\$0	0%
5	Due From Affiliates	\$0	\$0	\$0	0%
6	Due From Third Party Payers	\$1,411,000	\$2,403,000	\$992,000	70%
7	Inventories of Supplies	\$3,852,000	\$3,786,000	(\$66,000)	-2%
8	Prepaid Expenses	\$1,895,000	\$2,522,000	\$627,000	33%
9	Other Current Assets	\$4,297,000	\$5,643,000	\$1,346,000	31%
	Total Current Assets	\$128,144,000	\$137,315,000	\$9,171,000	7%
B.	Noncurrent Assets Whose Use is Limited:				
1	Held by Trustee	\$548,000	\$1,103,000	\$555,000	101%
2	Board Designated for Capital Acquisition	\$0	\$0	\$0	0%
3	Funds Held in Escrow	\$5,788,000	\$5,788,000	\$0	0%
4	Other Noncurrent Assets Whose Use is Limited	\$0	\$0	\$0	0%
	Total Noncurrent Assets Whose Use is Limited:	\$6,336,000	\$6,891,000	\$555,000	9%
5	Interest in Net Assets of Foundation	\$0	\$0	\$0	0%
6	Long Term Investments	\$40,789,000	\$43,246,000	\$2,457,000	6%
7	Other Noncurrent Assets	\$8,933,000	\$18,590,000	\$9,657,000	108%
C.	Net Fixed Assets:				
1	Property, Plant and Equipment	\$362,880,000	\$371,922,000	\$9,042,000	2%
2	Less: Accumulated Depreciation	\$249,254,000	\$265,257,000	\$16,003,000	\$0
	Property, Plant and Equipment, Net	\$113,626,000	\$106,665,000	(\$6,961,000)	-6%
3	Construction in Progress	\$4,946,000	\$18,530,000	\$13,584,000	275%
	Total Net Fixed Assets	\$118,572,000	\$125,195,000	\$6,623,000	6%
	Total Assets	\$302,774,000	\$331,237,000	\$28,463,000	9%

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 300 - HOSPITAL BALANCE SHEET INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
II. LIABILITIES AND NET ASSETS					
A. Current Liabilities:					
1	Accounts Payable and Accrued Expenses	\$11,257,000	\$13,308,000	\$2,051,000	18%
2	Salaries, Wages and Payroll Taxes	\$34,944,000	\$40,168,000	\$5,224,000	15%
3	Due To Third Party Payers	\$2,860,000	\$3,987,000	\$1,127,000	39%
4	Due To Affiliates	\$0	\$0	\$0	0%
5	Current Portion of Long Term Debt	\$2,945,000	\$3,832,000	\$887,000	30%
6	Current Portion of Notes Payable	\$0	\$0	\$0	0%
7	Other Current Liabilities	\$0	\$0	\$0	0%
	Total Current Liabilities	\$52,006,000	\$61,295,000	\$9,289,000	18%
B. Long Term Debt:					
1	Bonds Payable (Net of Current Portion)	\$47,145,000	\$49,757,000	\$2,612,000	6%
2	Notes Payable (Net of Current Portion)	\$0	\$0	\$0	0%
	Total Long Term Debt	\$47,145,000	\$49,757,000	\$2,612,000	6%
3	Accrued Pension Liability	\$55,462,000	\$58,208,000	\$2,746,000	5%
4	Other Long Term Liabilities	\$47,569,000	\$45,835,000	(\$1,734,000)	-4%
	Total Long Term Liabilities	\$150,176,000	\$153,800,000	\$3,624,000	2%
5	Interest in Net Assets of Affiliates or Joint	\$0	\$0	\$0	0%
C. Net Assets:					
1	Unrestricted Net Assets or Equity	\$60,022,000	\$72,064,000	\$12,042,000	20%
2	Temporarily Restricted Net Assets	\$23,262,000	\$24,997,000	\$1,735,000	7%
3	Permanently Restricted Net Assets	\$17,308,000	\$19,081,000	\$1,773,000	10%
	Total Net Assets	\$100,592,000	\$116,142,000	\$15,550,000	15%
	Total Liabilities and Net Assets	\$302,774,000	\$331,237,000	\$28,463,000	9%

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 350 - HOSPITAL STATEMENT OF OPERATIONS INFORMATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	FY 2010 ACTUAL	FY 2011 ACTUAL	AMOUNT DIFFERENCE	% DIFFERENCE
A. Operating Revenue:					
1	Total Gross Patient Revenue	\$1,211,791,000	\$1,300,540,000	\$88,749,000	7%
2	Less: Allowances	\$810,016,000	\$851,787,000	\$41,771,000	5%
3	Less: Charity Care	\$25,339,000	\$29,578,000	\$4,239,000	17%
4	Less: Other Deductions	\$7,004,000	\$9,560,000	\$2,556,000	36%
	Total Net Patient Revenue	\$369,432,000	\$409,615,000	\$40,183,000	11%
5	Other Operating Revenue	\$6,446,000	\$6,230,000	(\$216,000)	-3%
6	Net Assets Released from Restrictions	\$4,135,000	\$4,651,000	\$516,000	12%
	Total Operating Revenue	\$380,013,000	\$420,496,000	\$40,483,000	11%
B. Operating Expenses:					
1	Salaries and Wages	\$139,816,000	\$139,990,000	\$174,000	0%
2	Fringe Benefits	\$44,208,000	\$47,178,000	\$2,970,000	7%
3	Physicians Fees	\$14,982,000	\$18,061,000	\$3,079,000	21%
4	Supplies and Drugs	\$45,842,000	\$46,888,000	\$1,046,000	2%
5	Depreciation and Amortization	\$17,942,000	\$17,957,000	\$15,000	0%
6	Bad Debts	\$13,505,000	\$12,302,000	(\$1,203,000)	-9%
7	Interest	\$3,059,000	\$3,110,000	\$51,000	2%
8	Malpractice	\$10,036,000	\$5,829,000	(\$4,207,000)	-42%
9	Other Operating Expenses	\$76,609,000	\$102,210,000	\$25,601,000	33%
	Total Operating Expenses	\$365,999,000	\$393,525,000	\$27,526,000	8%
	Income/(Loss) From Operations	\$14,014,000	\$26,971,000	\$12,957,000	92%
C. Non-Operating Revenue:					
1	Income from Investments	\$0	\$0	\$0	0%
2	Gifts, Contributions and Donations	\$0	\$0	\$0	0%
3	Other Non-Operating Gains/(Losses)	\$269,000	\$642,000	\$373,000	139%
	Total Non-Operating Revenue	\$269,000	\$642,000	\$373,000	139%
	Excess/(Deficiency) of Revenue Over Expenses (Before Other Adjustments)	\$14,283,000	\$27,613,000	\$13,330,000	93%
Other Adjustments:					
	Unrealized Gains/(Losses)	\$1,497,000	(\$680,000)	(\$2,177,000)	-145%
	All Other Adjustments	\$0	\$0	\$0	0%
	Total Other Adjustments	\$1,497,000	(\$680,000)	(\$2,177,000)	-145%
	Excess/(Deficiency) of Revenue Over Expenses	\$15,780,000	\$26,933,000	\$11,153,000	71%

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
A. Parent Corporation Statement of Operations Summary				
1	Net Patient Revenue	\$371,280,000	\$369,432,000	\$409,615,000
2	Other Operating Revenue	9,708,000	10,581,000	10,881,000
3	Total Operating Revenue	\$380,988,000	\$380,013,000	\$420,496,000
4	Total Operating Expenses	377,600,000	365,999,000	393,525,000
5	Income/(Loss) From Operations	\$3,388,000	\$14,014,000	\$26,971,000
6	Total Non-Operating Revenue	(3,545,000)	1,766,000	(38,000)
7	Excess/(Deficiency) of Revenue Over Expenses	(\$157,000)	\$15,780,000	\$26,933,000
B. Parent Corporation Profitability Summary				
1	Parent Corporation Operating Margin	0.90%	3.67%	6.41%
2	Parent Corporation Non-Operating Margin	-0.94%	0.46%	-0.01%
3	Parent Corporation Total Margin	-0.04%	4.13%	6.41%
4	Income/(Loss) From Operations	\$3,388,000	\$14,014,000	\$26,971,000
5	Total Operating Revenue	\$380,988,000	\$380,013,000	\$420,496,000
6	Total Non-Operating Revenue	(\$3,545,000)	\$1,766,000	(\$38,000)
7	Total Revenue	\$377,443,000	\$381,779,000	\$420,458,000
8	Excess/(Deficiency) of Revenue Over Expenses	(\$157,000)	\$15,780,000	\$26,933,000
C. Parent Corporation Net Assets Summary				
1	Parent Corporation Unrestricted Net Assets	\$47,837,000	\$60,022,000	\$72,064,000
2	Parent Corporation Total Net Assets	\$86,691,000	\$100,592,000	\$116,142,000
3	Parent Corporation Change in Total Net Assets	(\$63,220,000)	\$13,901,000	\$15,550,000
4	Parent Corporation Change in Total Net Assets %	57.8%	16.0%	15.5%

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.

TWELVE MONTHS ACTUAL FILING

FISCAL YEAR 2011

REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS

(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
D. Liquidity Measures Summary				
1	Current Ratio	1.62	2.46	2.24
2	Total Current Assets	\$79,766,000	\$128,144,000	\$137,315,000
3	Total Current Liabilities	\$49,103,000	\$52,006,000	\$61,295,000
4	Days Cash on Hand	36	92	79
5	Cash and Cash Equivalents	\$35,088,000	\$45,152,000	\$37,449,000
6	Short Term Investments	0	42,391,000	43,693,000
7	Total Cash and Short Term Investments	\$35,088,000	\$87,543,000	\$81,142,000
8	Total Operating Expenses	\$377,600,000	\$365,999,000	\$393,525,000
9	Depreciation Expense	\$19,468,000	\$17,942,000	\$17,957,000
10	Operating Expenses less Depreciation Expense	\$358,132,000	\$348,057,000	\$375,568,000
11	Days Revenue in Patient Accounts Receivable	34	27	36
12	Net Patient Accounts Receivable	\$ 34,835,000	\$ 29,146,000	\$ 41,819,000
13	Due From Third Party Payers	\$0	\$1,411,000	\$2,403,000
14	Due To Third Party Payers	\$0	\$2,860,000	\$3,987,000
15	Total Net Patient Accounts Receivable and Third Party Payer Activity	\$ 34,835,000	\$ 27,697,000	\$ 40,235,000
16	Total Net Patient Revenue	\$371,280,000	\$369,432,000	\$409,615,000
17	Average Payment Period	50	55	60
18	Total Current Liabilities	\$49,103,000	\$52,006,000	\$61,295,000
19	Total Operating Expenses	\$377,600,000	\$365,999,000	\$393,525,000
20	Depreciation Expense	\$19,468,000	\$17,942,000	\$17,957,000
21	Total Operating Expenses less Depreciation Expense	\$358,132,000	\$348,057,000	\$375,568,000

BRIDGEPORT HOSPITAL & HEALTHCARE SERVICES, INC.				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 385 - PARENT CORPORATION CONSOLIDATED FINANCIAL DATA ANALYSIS				
(1)	(2)	(3)	(4)	(5)
		ACTUAL	ACTUAL	ACTUAL
LINE	DESCRIPTION	FY 2009	FY 2010	FY 2011
E.	<u>Solvency Measures Summary</u>			
1	<u>Equity Financing Ratio</u>	30.4	33.2	35.1
2	Total Net Assets	\$86,691,000	\$100,592,000	\$116,142,000
3	Total Assets	\$284,954,000	\$302,774,000	\$331,237,000
4	<u>Cash Flow to Total Debt Ratio</u>	19.5	34.0	40.4
5	Excess/(Deficiency) of Revenues Over Expenses	(\$157,000)	\$15,780,000	\$26,933,000
6	Depreciation Expense	\$19,468,000	\$17,942,000	\$17,957,000
7	Excess of Revenues Over Expenses and Depreciation Expense	\$19,311,000	\$33,722,000	\$44,890,000
8	Total Current Liabilities	\$49,103,000	\$52,006,000	\$61,295,000
9	Total Long Term Debt	\$50,090,000	\$47,145,000	\$49,757,000
10	Total Current Liabilities and Total Long Term Debt	\$99,193,000	\$99,151,000	\$111,052,000
11	<u>Long Term Debt to Capitalization Ratio</u>	36.6	31.9	30.0
12	Total Long Term Debt	\$50,090,000	\$47,145,000	\$49,757,000
13	Total Net Assets	\$86,691,000	\$100,592,000	\$116,142,000
14	Total Long Term Debt and Total Net Assets	\$136,781,000	\$147,737,000	\$165,899,000

BRIDGEPORT HOSPITAL								
TWELVE MONTHS ACTUAL FILING								
FISCAL YEAR 2011								
REPORT 400 - HOSPITAL INPATIENT BED UTILIZATION BY DEPARTMENT								
(1)	(2)	(3)	3(a)	3(b)	(4)	(5)	(6)	(7)
			DISCHARGES				OCCUPANCY	OCCUPANCY
		PATIENT	OR ICU/CCU	ADMISSIONS	STAFFED	AVAILABLE	OF STAFFED	OF AVAILABLE
LINE	DESCRIPTION	DAYS	# PATIENT		BEDS (A)	BEDS	BEDS (A)	BEDS
1	Adult Medical/Surgical	66,837	12,238	12,652	184	229	99.5%	80.0%
2	ICU/CCU (Excludes Neonatal ICU)	7,427	477	0	21	36	96.9%	56.5%
3	Psychiatric: Ages 0 to 17	0	0	0	0	0	0.0%	0.0%
4	Psychiatric: Ages 18+	5,985	705	630	17	19	96.5%	86.3%
	TOTAL PSYCHIATRIC	5,985	705	630	17	19	96.5%	86.3%
5	Rehabilitation	5,352	410	408	15	18	97.8%	81.5%
6	Maternity	7,620	2,440	2,496	21	42	99.4%	49.7%
7	Newborn	4,798	1,970	2,030	14	24	93.9%	54.8%
8	Neonatal ICU	3,933	257	0	11	20	98.0%	53.9%
9	Pediatric	2,143	1,038	810	6	18	97.9%	32.6%
10	Other	0	0	0	0	0	0.0%	0.0%
	TOTAL EXCLUDING NEWBORN	99,297	17,088	16,996	275	382	98.9%	71.2%
	TOTAL INPATIENT BED UTILIZATION	104,095	19,058	19,026	289	406	98.7%	70.2%
	TOTAL INPATIENT REPORTED YEAR	104,095	19,058	19,026	289	406	98.7%	70.2%
	TOTAL INPATIENT PRIOR YEAR	104,729	0	0	290	397	98.9%	72.3%
	DIFFERENCE #: REPORTED VS. PRIOR YEAR	-634	19,058	19,026	-1	9	-0.3%	-2.0%
	DIFFERENCE %: REPORTED VS. PRIOR YEAR	-1%	0%	0%	0%	2%	0%	-3%
	Total Licensed Beds and Bassinets	425						
(A) This number may not exceed the number of available beds for each department or in total.								

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
A. CT Scans (A)					
1	Inpatient Scans	11,699	9,588	-2,111	-18%
2	Outpatient Scans (Excluding Emergency Department Scans)	2,326	1,979	-347	-15%
3	Emergency Department Scans	9,373	9,206	-167	-2%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total CT Scans	23,398	20,773	-2,625	-11%
B. MRI Scans (A)					
1	Inpatient Scans	973	1,122	149	15%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	258	287	29	11%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total MRI Scans	1,231	1,409	178	14%
C. PET Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	0	0	0	0%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET Scans	0	0	0	0%
D. PET/CT Scans (A)					
1	Inpatient Scans	0	0	0	0%
2	Outpatient Scans (Excluding Emergency Department Scans)	170	166	-4	-2%
3	Emergency Department Scans	0	0	0	0%
4	Other Non-Hospital Providers' Scans (A)	0	0	0	0%
	Total PET/CT Scans	170	166	-4	-2%
(A) If the Hospital is not the primary provider of these scans, the Hospital must obtain the fiscal year volume of each of these types of scans from the primary provider of the scans.					
E. Linear Accelerator Procedures					
1	Inpatient Procedures	288	200	-88	-31%
2	Outpatient Procedures	8,984	6,991	-1,993	-22%
	Total Linear Accelerator Procedures	9,272	7,191	-2,081	-22%
F. Cardiac Catheterization Procedures					
1	Inpatient Procedures	623	480	-143	-23%
2	Outpatient Procedures	345	394	49	14%
	Total Cardiac Catheterization Procedures	968	874	-94	-10%
G. Cardiac Angioplasty Procedures					
1	Primary Procedures	182	192	10	5%
2	Elective Procedures	300	279	-21	-7%
	Total Cardiac Angioplasty Procedures	482	471	-11	-2%
H. Electrophysiology Studies					
1	Inpatient Studies	105	95	-10	-10%
2	Outpatient Studies	222	239	17	8%
	Total Electrophysiology Studies	327	334	7	2%
I. Surgical Procedures					
1	Inpatient Surgical Procedures	4,217	4,078	-139	-3%
2	Outpatient Surgical Procedures	7,245	7,528	283	4%
	Total Surgical Procedures	11,462	11,606	144	1%
J. Endoscopy Procedures					

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 450 - HOSPITAL INPATIENT AND OUTPATIENT OTHER SERVICES UTILIZATION AND FTEs					
(1)	(2)	(3)	(4)	(5)	(6)
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
1	Inpatient Endoscopy Procedures	1,085	1,104	19	2%
2	Outpatient Endoscopy Procedures	5,773	5,769	-4	0%
	Total Endoscopy Procedures	6,858	6,873	15	0%
K. Hospital Emergency Room Visits					
1	Emergency Room Visits: Treated and Admitted	10,660	11,166	506	5%
2	Emergency Room Visits: Treated and Discharged	65,012	65,670	658	1%
	Total Emergency Room Visits	75,672	76,836	1,164	2%
L. Hospital Clinic Visits					
1	Substance Abuse Treatment Clinic Visits	0	0	0	0%
2	Dental Clinic Visits	0	0	0	0%
3	Psychiatric Clinic Visits	0	0	0	0%
4	Medical Clinic Visits	28,057	28,887	830	3%
5	Specialty Clinic Visits	7,545	7,304	-241	-3%
	Total Hospital Clinic Visits	35,602	36,191	589	2%
M. Other Hospital Outpatient Visits					
1	Rehabilitation (PT/OT/ST)	40,280	41,229	949	2%
2	Cardiology	3,812	4,005	193	5%
3	Chemotherapy	709	772	63	9%
4	Gastroenterology	5,773	5,769	-4	0%
5	Other Outpatient Visits	85,468	95,520	10,052	12%
	Total Other Hospital Outpatient Visits	136,042	147,295	11,253	8%
N. Hospital Full Time Equivalent Employees					
1	Total Nursing FTEs	571.6	580.1	8.5	1%
2	Total Physician FTEs	139.8	135.9	-3.9	-3%
3	Total Non-Nursing and Non-Physician FTEs	1,304.0	1,369.9	65.9	5%
	Total Hospital Full Time Equivalent Employees	2,015.4	2,085.9	70.5	3%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT 485 - HOSPITAL OUTPATIENT SURGICAL, ENDOSCOPY AND EMERGENCY ROOM SERVICES BY LOCATION					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
A. Outpatient Surgical Procedures					
1	Bridgeport Hospital	7,245	7,528	283	4%
	Total Outpatient Surgical Procedures(A)	7,245	7,528	283	4%
B. Outpatient Endoscopy Procedures					
1	Bridgeport Hospital	5,773	5,769	-4	0%
	Total Outpatient Endoscopy Procedures(B)	5,773	5,769	-4	0%
C. Outpatient Hospital Emergency Room Visits					
1	Bridgeport Hospital	65,012	65,670	658	1%
	Total Outpatient Hospital Emergency Room Visits(C)	65,012	65,670	658	1%
(A) Must agree with Total Outpatient Surgical Procedures on Report 450.					
(B) Must agree with Total Outpatient Endoscopy Procedures on Report 450.					
(C) Must agree with Emergency Room Visits Treated and Discharged on Report 450.					

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
I. DATA BY MAJOR PAYER CATEGORY					
A. MEDICARE					
MEDICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$347,619,438	\$355,841,758	\$8,222,320	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$109,039,611	\$116,690,530	\$7,650,919	7%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	31.37%	32.79%	1.43%	5%
4	DISCHARGES	6,937	6,932	(5)	0%
5	CASE MIX INDEX (CMI)	1.66225	1.61289	(0.04936)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	11,531.02825	11,180.55348	(350.47477)	-3%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$9,456.19	\$10,436.92	\$980.73	10%
8	PATIENT DAYS	52,379	51,339	(1,040)	-2%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$2,081.74	\$2,272.94	\$191.20	9%
10	AVERAGE LENGTH OF STAY	7.6	7.4	(0.1)	-2%
MEDICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$119,913,466	\$145,753,576	\$25,840,110	22%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$22,007,322	\$27,661,355	\$5,654,033	26%
13	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	18.35%	18.98%	0.63%	3%
14	OUTPATIENT CHARGES / INPATIENT CHARGES	34.50%	40.96%	6.46%	19%
15	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	2,392.96087	2,839.36263	446.40175	19%
16	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,196.69	\$9,742.10	\$545.41	6%
MEDICARE TOTALS (INPATIENT + OUTPATIENT)					
17	TOTAL ACCRUED CHARGES	\$467,532,904	\$501,595,334	\$34,062,430	7%
18	TOTAL ACCRUED PAYMENTS	\$131,046,933	\$144,351,885	\$13,304,952	10%
19	TOTAL ALLOWANCES	\$336,485,971	\$357,243,449	\$20,757,478	6%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
B. NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)					
NON-GOVERNMENT INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$196,128,578	\$213,400,151	\$17,271,573	9%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$86,137,720	\$95,766,076	\$9,628,356	11%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	43.92%	44.88%	0.96%	2%
4	DISCHARGES	6,407	6,089	(318)	-5%
5	CASE MIX INDEX (CMI)	1.18277	1.22483	0.04206	4%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	7,578.00739	7,457.98987	(120.01752)	-2%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$11,366.80	\$12,840.74	\$1,473.93	13%
8	MEDICARE - NON-GOVERNMENT IP PMT / CMAD	(\$1,910.61)	(\$2,403.82)	(\$493.20)	26%
9	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$14,478,631)	(\$17,927,641)	(\$3,449,009)	24%
10	PATIENT DAYS	24,833	25,520	687	3%
11	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$3,468.68	\$3,752.59	\$283.91	8%
12	AVERAGE LENGTH OF STAY	3.9	4.2	0.3	8%
NON-GOVERNMENT OUTPATIENT					
13	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$209,077,063	\$247,235,586	\$38,158,523	18%
14	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$66,534,182	\$86,464,944	\$19,930,762	30%
15	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	31.82%	34.97%	3.15%	10%
16	OUTPATIENT CHARGES / INPATIENT CHARGES	106.60%	115.86%	9.25%	9%
17	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	6,829.99263	7,054.43495	224.44232	3%
18	OUTPATIENT ACCRUED PAYMENTS / OPED	\$9,741.47	\$12,256.82	\$2,515.35	26%
19	MEDICARE - NON-GOVERNMENT OP PMT / OPED	(\$544.78)	(\$2,514.72)	(\$1,969.94)	362%
20	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	(\$3,720,849)	(\$17,739,932)	(\$14,019,083)	377%
NON-GOVERNMENT TOTALS (INPATIENT + OUTPATIENT)					
21	TOTAL ACCRUED CHARGES	\$405,205,641	\$460,635,737	\$55,430,096	14%
22	TOTAL ACCRUED PAYMENTS	\$152,671,902	\$182,231,020	\$29,559,118	19%
23	TOTAL ALLOWANCES	\$252,533,739	\$278,404,717	\$25,870,978	10%
24	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	(\$18,199,481)	(\$35,667,573)	(\$17,468,092)	96%
NON-GOVERNMENT CONTRACTUAL ALLOWANCES (NGCA) DATA					
25	ACCRUED CHARGES ASSOCIATED WITH NGCA	\$349,741,731	\$401,607,588	\$51,865,857	15%
26	ACCRUED PAYMENTS ASSOCIATED WITH NGCA (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$135,799,425	\$113,130,118	(\$22,669,307)	-17%
27	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$213,942,306	\$288,477,470	\$74,535,164	35%
28	TOTAL ACTUAL DISCOUNT PERCENTAGE	61.17%	71.83%	10.66%	

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
C. UNINSURED					
UNINSURED INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$9,670,822	\$9,870,815	\$199,993	2%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$952,380	\$2,770,737	\$1,818,357	191%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	9.85%	28.07%	18.22%	185%
4	DISCHARGES	311	262	(49)	-16%
5	CASE MIX INDEX (CMI)	1.18285	1.14876	(0.03409)	-3%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	367.86635	300.97512	(66.89123)	-18%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,588.93	\$9,205.87	\$6,616.94	256%
8	NON-GOVERNMENT - UNINSURED IP PMT / CMAD	\$8,777.87	\$3,634.87	(\$5,143.01)	-59%
9	MEDICARE - UNINSURED IP PMT / CMAD	\$6,867.26	\$1,231.05	(\$5,636.21)	-82%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,526,235	\$370,516	(\$2,155,719)	-85%
11	PATIENT DAYS	1,212	1,106	(106)	-9%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$785.79	\$2,505.19	\$1,719.40	219%
13	AVERAGE LENGTH OF STAY	3.9	4.2	0.3	8%
UNINSURED OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$30,889,642	\$33,143,267	\$2,253,625	7%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$2,336,439	\$2,427,657	\$91,218	4%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	7.56%	7.32%	-0.24%	-3%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	319.41%	335.77%	16.36%	5%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	993.36733	879.71824	(113.64910)	-11%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$2,352.04	\$2,759.58	\$407.55	17%
20	NON-GOVERNMENT - UNINSURED OP PMT / OPED	\$7,389.43	\$9,497.24	\$2,107.80	29%
21	MEDICARE - UNINSURED OP PMT / OPED	\$6,844.65	\$6,982.52	\$137.86	2%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$6,799,254	\$6,142,646	(\$656,607)	-10%
UNINSURED TOTALS (INPATIENT AND OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$40,560,464	\$43,014,082	\$2,453,618	6%
24	TOTAL ACCRUED PAYMENTS	\$3,288,819	\$5,198,394	\$1,909,575	58%
25	TOTAL ALLOWANCES	\$37,271,645	\$37,815,688	\$544,043	1%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$9,325,488	\$6,513,162	(\$2,812,326)	-30%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
D. STATE OF CONNECTICUT MEDICAID					
MEDICAID INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$151,940,447	\$177,982,732	\$26,042,285	17%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$36,750,880	\$45,929,919	\$9,179,039	25%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	24.19%	25.81%	1.62%	7%
4	DISCHARGES	5,266	6,004	738	14%
5	CASE MIX INDEX (CMI)	1.00191	0.99749	(0.00442)	0%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,276.05806	5,988.92996	712.87190	14%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,965.59	\$7,669.14	\$703.54	10%
8	NON-GOVERNMENT - MEDICAID IP PMT / CMAD	\$4,401.21	\$5,171.60	\$770.39	18%
9	MEDICARE - MEDICAID IP PMT / CMAD	\$2,490.60	\$2,767.78	\$277.19	11%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$13,140,535	\$16,576,057	\$3,435,522	26%
11	PATIENT DAYS	25,153	27,110	1,957	8%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,461.09	\$1,694.21	\$233.11	16%
13	AVERAGE LENGTH OF STAY	4.8	4.5	(0.3)	-5%
MEDICAID OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$129,447,743	\$158,446,128	\$28,998,385	22%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$22,613,318	\$27,051,433	\$4,438,115	20%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.47%	17.07%	-0.40%	-2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	85.20%	89.02%	3.83%	4%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,486.44076	5,344.95983	858.51907	19%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$5,040.37	\$5,061.11	\$20.74	0%
20	NON-GOVERNMENT - MEDICAID OP PMT / OPED	\$4,701.10	\$7,195.71	\$2,494.61	53%
21	MEDICARE - MEDICAID OP PMT / OPED	\$4,156.32	\$4,680.99	\$524.67	13%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$18,647,092	\$25,019,701	\$6,372,609	34%
MEDICAID TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$281,388,190	\$336,428,860	\$55,040,670	20%
24	TOTAL ACCRUED PAYMENTS	\$59,364,198	\$72,981,352	\$13,617,154	23%
25	TOTAL ALLOWANCES	\$222,023,992	\$263,447,508	\$41,423,516	19%
26	TOTAL UPPER LIMIT (OVER) / UNDERPAYMENT	\$31,787,627	\$41,595,758	\$9,808,131	31%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
E. OTHER MEDICAL ASSISTANCE (O.M.A.)					
OTHER MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$15,148,822	\$0	(\$15,148,822)	-100%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$1,559,167	\$0	(\$1,559,167)	-100%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	10.29%	0.00%	-10.29%	-100%
4	DISCHARGES	406	-	(406)	-100%
5	CASE MIX INDEX (CMI)	1.23747	0.00000	(1.23747)	-100%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	502.41282	0.00000	(502.41282)	-100%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$3,103.36	\$0.00	(\$3,103.36)	-100%
8	NON-GOVERNMENT - O.M.A. IP PMT / CMAD	\$8,263.45	\$12,840.74	\$4,577.29	55%
9	MEDICARE - O.M.A. IP PMT / CMAD	\$6,352.83	\$10,436.92	\$4,084.09	64%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$3,191,745	\$0	(\$3,191,745)	-100%
11	PATIENT DAYS	2,248	0	(2,248)	-100%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$693.58	\$0.00	(\$693.58)	-100%
13	AVERAGE LENGTH OF STAY	5.5	-	(5.5)	-100%
OTHER MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$14,853,469	\$0	(\$14,853,469)	-100%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$1,456,241	\$0	(\$1,456,241)	-100%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	9.80%	0.00%	-9.80%	-100%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	98.05%	0.00%	-98.05%	-100%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	398.08431	0.00000	(398.08431)	-100%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$3,658.12	\$0.00	(\$3,658.12)	-100%
20	NON-GOVERNMENT - O.M.A. OP PMT / CMAD	\$6,083.35	\$12,256.82	\$6,173.47	101%
21	MEDICARE - O.M.A. OP PMT / CMAD	\$5,538.57	\$9,742.10	\$4,203.53	76%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$2,204,817	\$0	(\$2,204,817)	-100%
OTHER MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$30,002,291	\$0	(\$30,002,291)	-100%
24	TOTAL ACCRUED PAYMENTS	\$3,015,408	\$0	(\$3,015,408)	-100%
25	TOTAL ALLOWANCES	\$26,986,883	\$0	(\$26,986,883)	-100%
26	TOTAL OTHER MEDICAL ASSISTANCE UPPER LIMIT UNDERPAYMENT	\$5,396,562	\$0	(\$5,396,562)	-100%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
F. TOTAL MEDICAL ASSISTANCE (MEDICAID + OTHER MEDICAL ASSISTANCE)					
TOTAL MEDICAL ASSISTANCE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$167,089,269	\$177,982,732	\$10,893,463	7%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$38,310,047	\$45,929,919	\$7,619,872	20%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	22.93%	25.81%	2.88%	13%
4	DISCHARGES	5,672	6,004	332	6%
5	CASE MIX INDEX (CMI)	1.01877	0.99749	(0.02128)	-2%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	5,778.47088	5,988.92996	210.45908	4%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$6,629.79	\$7,669.14	\$1,039.35	16%
8	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$4,737.01	\$5,171.60	\$434.59	9%
9	MEDICARE - TOTAL MEDICAL ASSISTANCE IP PMT / CMAD	\$2,826.40	\$2,767.78	(\$58.62)	-2%
10	INPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$16,332,280	\$16,576,057	\$243,777	1%
11	PATIENT DAYS	27,401	27,110	(291)	-1%
12	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$1,398.13	\$1,694.21	\$296.08	21%
13	AVERAGE LENGTH OF STAY	4.8	4.5	(0.3)	-7%
TOTAL MEDICAL ASSISTANCE OUTPATIENT					
14	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$144,301,212	\$158,446,128	\$14,144,916	10%
15	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$24,069,559	\$27,051,433	\$2,981,874	12%
16	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	16.68%	17.07%	0.39%	2%
17	OUTPATIENT CHARGES / INPATIENT CHARGES	86.36%	89.02%	2.66%	3%
18	OUTPATIENT EQUIVALENT DISCHARGES (OPED)	4,884.52507	5,344.95983	460.43475	9%
19	OUTPATIENT ACCRUED PAYMENTS / OPED	\$4,927.72	\$5,061.11	\$133.39	3%
20	NON-GOVERNMENT - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,813.75	\$7,195.71	\$2,381.96	49%
21	MEDICARE - TOTAL MEDICAL ASSISTANCE OP PMT / OPED	\$4,268.97	\$4,680.99	\$412.02	10%
22	OUTPATIENT UPPER LIMIT (OVER) / UNDERPAYMENT	\$20,851,909	\$25,019,701	\$4,167,791	20%
TOTAL MEDICAL ASSISTANCE TOTALS (INPATIENT + OUTPATIENT)					
23	TOTAL ACCRUED CHARGES	\$311,390,481	\$336,428,860	\$25,038,379	8%
24	TOTAL ACCRUED PAYMENTS	\$62,379,606	\$72,981,352	\$10,601,746	17%
25	TOTAL ALLOWANCES	\$249,010,875	\$263,447,508	\$14,436,633	6%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
G. CHAMPUS / TRICARE					
CHAMPUS / TRICARE INPATIENT					
1	INPATIENT ACCRUED CHARGES	\$780,040	\$822,407	\$42,367	5%
2	INPATIENT ACCRUED PAYMENTS (IP PMT)	\$83,456	\$162,598	\$79,142	95%
3	INPATIENT PAYMENTS / INPATIENT CHARGES	10.70%	19.77%	9.07%	85%
4	DISCHARGES	28	33	5	18%
5	CASE MIX INDEX (CMI)	1.04640	0.87963	(0.16677)	-16%
6	CASE MIX ADJUSTED DISCHARGES (CMAD)	29.29920	29.02779	(0.27141)	-1%
7	INPATIENT ACCRUED PAYMENT / CMAD	\$2,848.41	\$5,601.46	\$2,753.05	97%
8	PATIENT DAYS	116	126	10	9%
9	INPATIENT ACCRUED PAYMENT / PATIENT DAY	\$719.45	\$1,290.46	\$571.01	79%
10	AVERAGE LENGTH OF STAY	4.1	3.8	(0.3)	-8%
CHAMPUS / TRICARE OUTPATIENT					
11	OUTPATIENT ACCRUED CHARGES (OP CHGS)	\$680,630	\$1,057,263	\$376,633	55%
12	OUTPATIENT ACCRUED PAYMENTS (OP PMT)	\$169,111	\$208,130	\$39,019	23%
CHAMPUS / TRICARE TOTALS (INPATIENT + OUTPATIENT)					
13	TOTAL ACCRUED CHARGES	\$1,460,670	\$1,879,670	\$419,000	29%
14	TOTAL ACCRUED PAYMENTS	\$252,567	\$370,728	\$118,161	47%
15	TOTAL ALLOWANCES	\$1,208,103	\$1,508,942	\$300,839	25%
H. OTHER DATA					
1	OTHER OPERATING REVENUE	\$5,828,673	\$5,964,831	\$136,158	2%
2	TOTAL OPERATING EXPENSES	\$350,215,000	\$383,278,000	\$33,063,000	9%
3	UCP DSH PAYMENTS (Gross DSH plus Upper Limit Adjustment)	\$2,988,794	\$0	(\$2,988,794)	-100%
COST OF UNCOMPENSATED CARE (BASELINE METHODOLOGY)					
4	CHARITY CARE (CHARGES)	\$12,024,692	\$13,664,086	\$1,639,394	14%
5	BAD DEBTS (CHARGES)	\$25,581,567	\$28,215,688	\$2,634,121	10%
6	UNCOMPENSATED CARE (CHARGES)	\$37,606,259	\$41,879,774	\$4,273,515	11%
7	COST OF UNCOMPENSATED CARE	\$11,080,019	\$11,169,805	\$89,785	1%
TOTAL MEDICAL ASSISTANCE UNDERPAYMENT (BASELINE METHODOLOGY)					
8	TOTAL ACCRUED CHARGES	\$311,390,481	\$336,428,860	\$25,038,379	8%
9	TOTAL ACCRUED PAYMENTS	\$62,379,606	\$72,981,352	\$10,601,746	17%
10	COST OF TOTAL MEDICAL ASSISTANCE	\$91,745,699	\$89,729,343	(\$2,016,355)	-2%
11	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$29,366,093	\$16,747,991	(\$12,618,101)	-43%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
II. AGGREGATE DATA					
A. TOTALS - ALL PAYERS					
1	TOTAL INPATIENT CHARGES	\$711,617,325	\$748,047,048	\$36,429,723	5%
2	TOTAL INPATIENT PAYMENTS	\$233,570,834	\$258,549,123	\$24,978,289	11%
3	TOTAL INPATIENT PAYMENTS / CHARGES	32.82%	34.56%	1.74%	5%
4	TOTAL DISCHARGES	19,044	19,058	14	0%
5	TOTAL CASE MIX INDEX	1.30838	1.29376	(0.01462)	-1%
6	TOTAL CASE MIX ADJUSTED DISCHARGES	24,916.80572	24,656.50110	(260.30462)	-1%
7	TOTAL OUTPATIENT CHARGES	\$473,972,371	\$552,492,553	\$78,520,182	17%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	66.60%	73.86%	7.25%	11%
9	TOTAL OUTPATIENT PAYMENTS	\$112,780,174	\$141,385,862	\$28,605,688	25%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	23.79%	25.59%	1.80%	8%
11	TOTAL CHARGES	\$1,185,589,696	\$1,300,539,601	\$114,949,905	10%
12	TOTAL PAYMENTS	\$346,351,008	\$399,934,985	\$53,583,977	15%
13	TOTAL PAYMENTS / TOTAL CHARGES	29.21%	30.75%	1.54%	5%
14	PATIENT DAYS	104,729	104,095	(634)	-1%
B. TOTALS - ALL GOVERNMENT PAYERS					
1	INPATIENT CHARGES	\$515,488,747	\$534,646,897	\$19,158,150	4%
2	INPATIENT PAYMENTS	\$147,433,114	\$162,783,047	\$15,349,933	10%
3	GOVT. INPATIENT PAYMENTS / CHARGES	28.60%	30.45%	1.85%	6%
4	DISCHARGES	12,637	12,969	332	3%
5	CASE MIX INDEX	1.37207	1.32612	(0.04594)	-3%
6	CASE MIX ADJUSTED DISCHARGES	17,338.79833	17,198.51123	(140.28710)	-1%
7	OUTPATIENT CHARGES	\$264,895,308	\$305,256,967	\$40,361,659	15%
8	OUTPATIENT CHARGES / INPATIENT CHARGES	51.39%	57.10%	5.71%	11%
9	OUTPATIENT PAYMENTS	\$46,245,992	\$54,920,918	\$8,674,926	19%
10	OUTPATIENT PAYMENTS / OUTPATIENT CHARGES	17.46%	17.99%	0.53%	3%
11	TOTAL CHARGES	\$780,384,055	\$839,903,864	\$59,519,809	8%
12	TOTAL PAYMENTS	\$193,679,106	\$217,703,965	\$24,024,859	12%
13	TOTAL PAYMENTS / CHARGES	24.82%	25.92%	1.10%	4%
14	PATIENT DAYS	79,896	78,575	(1,321)	-2%
15	TOTAL GOVERNMENT DEDUCTIONS	\$586,704,949	\$622,199,899	\$35,494,950	6%
C. AVERAGE LENGTH OF STAY					
1	MEDICARE	7.6	7.4	(0.1)	-2%
2	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	4.2	0.3	8%
3	UNINSURED	3.9	4.2	0.3	8%
4	MEDICAID	4.8	4.5	(0.3)	-5%
5	OTHER MEDICAL ASSISTANCE	5.5	-	(5.5)	-100%
6	CHAMPUS / TRICARE	4.1	3.8	(0.3)	-8%
7	TOTAL AVERAGE LENGTH OF STAY	5.5	5.5	(0.0)	-1%

BRIDGEPORT HOSPITAL					
TWELVE MONTHS ACTUAL FILING					
FISCAL YEAR 2011					
REPORT FORM 500 - CALCULATION OF DSH UPPER PAYMENT LIMIT					
AND BASELINE UNDERPAYMENT DATA: COMPARATIVE ANALYSIS					
		ACTUAL	ACTUAL	AMOUNT	%
LINE	DESCRIPTION	FY 2010	FY 2011	DIFFERENCE	DIFFERENCE
III. DATA USED IN BASELINE UNDERPAYMENT CALCULATION					
1	TOTAL CHARGES	\$1,185,589,696	\$1,300,539,601	\$114,949,905	10%
2	TOTAL GOVERNMENT DEDUCTIONS	\$586,704,949	\$622,199,899	\$35,494,950	6%
3	UNCOMPENSATED CARE	\$37,606,259	\$41,879,774	\$4,273,515	
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$213,942,306	\$288,477,470	\$74,535,164	35%
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,011,938	\$1,113,987	\$102,049	10%
6	TOTAL ADJUSTMENTS	\$839,265,452	\$953,671,130	\$114,405,678	14%
7	TOTAL ACCRUED PAYMENTS	\$346,324,244	\$346,868,471	\$544,227	0%
8	UCP DSH PYMTS. (Gross DSH+Upper Limit Adj.- OHCA Input)	\$2,988,794	\$0	(\$2,988,794)	-100%
9	NET REVENUE USED TO CALCULATE DSH FUTURE PYMNTS.	\$349,313,038	\$346,868,471	(\$2,444,567)	-1%
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2946323160	0.2667111949	(0.0279211211)	-9%
11	COST OF UNCOMPENSATED CARE	\$11,080,019	\$11,169,805	\$89,785	1%
12	MEDICAL ASSISTANCE (OVER) / UNDERPAYMENT	\$29,366,093	\$16,747,991	(\$12,618,101)	-43%
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0	0%
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$40,446,112	\$27,917,796	(\$12,528,316)	-31%
IV. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)					
1	MEDICAID	\$18,647,092	\$25,019,701	\$6,372,609	34%
2	OTHER MEDICAL ASSISTANCE	\$5,396,562	\$0	(\$5,396,562)	-100%
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,325,488	\$6,513,162	(\$2,812,326)	-30%
4	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$33,369,142	\$31,532,863	(\$1,836,280)	-6%
V. DATA USED IN RECONCILIATIONS IN REPORTS 550 AND 600					
1	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,451,547	\$1,626,157	\$174,610	12.03%
2	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED NET REVENUE	\$9,722,198	\$9,679,611	(\$42,587)	-0.44%
3	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$359,062,000	\$409,615,000	\$50,553,000	14.08%
4	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0	0.00%
5	GROSS REVENUE FROM HOSP. AUDIT. FINANCIAL STATEMENTS	\$1,185,590,000	\$1,300,540,000	\$114,950,000	9.70%
6	PLUS/MINUS OTHER ADJUST. TO OHCA DEFINED UNCOMP. CARE	\$0	\$0	\$0	0.00%
7	UNCOMP. CARE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS	\$37,606,259	\$41,879,774	\$4,273,515	11.36%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
I. ACCRUED CHARGES AND PAYMENTS				
A. INPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$196,128,578	\$213,400,151	\$17,271,573
2	MEDICARE	\$347,619,438	355,841,758	\$8,222,320
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$167,089,269	177,982,732	\$10,893,463
4	MEDICAID	\$151,940,447	177,982,732	\$26,042,285
5	OTHER MEDICAL ASSISTANCE	\$15,148,822	0	(\$15,148,822)
6	CHAMPUS / TRICARE	\$780,040	822,407	\$42,367
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,670,822	9,870,815	\$199,993
	TOTAL INPATIENT GOVERNMENT CHARGES	\$515,488,747	\$534,646,897	\$19,158,150
	TOTAL INPATIENT CHARGES	\$711,617,325	\$748,047,048	\$36,429,723
B. OUTPATIENT ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$209,077,063	\$247,235,586	\$38,158,523
2	MEDICARE	\$119,913,466	145,753,576	\$25,840,110
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$144,301,212	158,446,128	\$14,144,916
4	MEDICAID	\$129,447,743	158,446,128	\$28,998,385
5	OTHER MEDICAL ASSISTANCE	\$14,853,469	0	(\$14,853,469)
6	CHAMPUS / TRICARE	\$680,630	1,057,263	\$376,633
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$30,889,642	33,143,267	\$2,253,625
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$264,895,308	\$305,256,967	\$40,361,659
	TOTAL OUTPATIENT CHARGES	\$473,972,371	\$552,492,553	\$78,520,182
C. TOTAL ACCRUED CHARGES				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$405,205,641	\$460,635,737	\$55,430,096
2	TOTAL MEDICARE	\$467,532,904	\$501,595,334	\$34,062,430
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$311,390,481	\$336,428,860	\$25,038,379
4	TOTAL MEDICAID	\$281,388,190	\$336,428,860	\$55,040,670
5	TOTAL OTHER MEDICAL ASSISTANCE	\$30,002,291	\$0	(\$30,002,291)
6	TOTAL CHAMPUS / TRICARE	\$1,460,670	\$1,879,670	\$419,000
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$40,560,464	\$43,014,082	\$2,453,618
	TOTAL GOVERNMENT CHARGES	\$780,384,055	\$839,903,864	\$59,519,809
	TOTAL CHARGES	\$1,185,589,696	\$1,300,539,601	\$114,949,905
D. INPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$86,137,720	\$95,766,076	\$9,628,356
2	MEDICARE	\$109,039,611	116,690,530	\$7,650,919
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$38,310,047	45,929,919	\$7,619,872
4	MEDICAID	\$36,750,880	45,929,919	\$9,179,039
5	OTHER MEDICAL ASSISTANCE	\$1,559,167	0	(\$1,559,167)
6	CHAMPUS / TRICARE	\$83,456	162,598	\$79,142
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$952,380	2,770,737	\$1,818,357
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$147,433,114	\$162,783,047	\$15,349,933
	TOTAL INPATIENT PAYMENTS	\$233,570,834	\$258,549,123	\$24,978,289
E. OUTPATIENT ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$66,534,182	\$86,464,944	\$19,930,762
2	MEDICARE	\$22,007,322	27,661,355	\$5,654,033
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$24,069,559	27,051,433	\$2,981,874
4	MEDICAID	\$22,613,318	27,051,433	\$4,438,115
5	OTHER MEDICAL ASSISTANCE	\$1,456,241	0	(\$1,456,241)
6	CHAMPUS / TRICARE	\$169,111	208,130	\$39,019
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,336,439	2,427,657	\$91,218
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$46,245,992	\$54,920,918	\$8,674,926
	TOTAL OUTPATIENT PAYMENTS	\$112,780,174	\$141,385,862	\$28,605,688
F. TOTAL ACCRUED PAYMENTS				
1	TOTAL NONGOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$152,671,902	\$182,231,020	\$29,559,118
2	TOTAL MEDICARE	\$131,046,933	\$144,351,885	\$13,304,952
3	TOTAL MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$62,379,606	\$72,981,352	\$10,601,746
4	TOTAL MEDICAID	\$59,364,198	\$72,981,352	\$13,617,154
5	TOTAL OTHER MEDICAL ASSISTANCE	\$3,015,408	\$0	(\$3,015,408)
6	TOTAL CHAMPUS / TRICARE	\$252,567	\$370,728	\$118,161
7	TOTAL UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$3,288,819	\$5,198,394	\$1,909,575
	TOTAL GOVERNMENT PAYMENTS	\$193,679,106	\$217,703,965	\$24,024,859
	TOTAL PAYMENTS	\$346,351,008	\$399,934,985	\$53,583,977

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
II. PAYER MIX				
A. INPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	16.54%	16.41%	-0.13%
2	MEDICARE	29.32%	27.36%	-1.96%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	14.09%	13.69%	-0.41%
4	MEDICAID	12.82%	13.69%	0.87%
5	OTHER MEDICAL ASSISTANCE	1.28%	0.00%	-1.28%
6	CHAMPUS / TRICARE	0.07%	0.06%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.82%	0.76%	-0.06%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	43.48%	41.11%	-2.37%
	TOTAL INPATIENT PAYER MIX	60.02%	57.52%	-2.50%
B. OUTPATIENT PAYER MIX BASED ON ACCRUED CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	17.63%	19.01%	1.38%
2	MEDICARE	10.11%	11.21%	1.09%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	12.17%	12.18%	0.01%
4	MEDICAID	10.92%	12.18%	1.26%
5	OTHER MEDICAL ASSISTANCE	1.25%	0.00%	-1.25%
6	CHAMPUS / TRICARE	0.06%	0.08%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2.61%	2.55%	-0.06%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	22.34%	23.47%	1.13%
	TOTAL OUTPATIENT PAYER MIX	39.98%	42.48%	2.50%
	TOTAL PAYER MIX BASED ON ACCRUED CHARGES	100.00%	100.00%	0.00%
C. INPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24.87%	23.95%	-0.92%
2	MEDICARE	31.48%	29.18%	-2.31%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	11.06%	11.48%	0.42%
4	MEDICAID	10.61%	11.48%	0.87%
5	OTHER MEDICAL ASSISTANCE	0.45%	0.00%	-0.45%
6	CHAMPUS / TRICARE	0.02%	0.04%	0.02%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.27%	0.69%	0.42%
	TOTAL INPATIENT GOVERNMENT PAYER MIX	42.57%	40.70%	-1.87%
	TOTAL INPATIENT PAYER MIX	67.44%	64.65%	-2.79%
D. OUTPATIENT PAYER MIX BASED ON ACCRUED PAYMENTS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	19.21%	21.62%	2.41%
2	MEDICARE	6.35%	6.92%	0.56%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6.95%	6.76%	-0.19%
4	MEDICAID	6.53%	6.76%	0.23%
5	OTHER MEDICAL ASSISTANCE	0.42%	0.00%	-0.42%
6	CHAMPUS / TRICARE	0.05%	0.05%	0.00%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	0.67%	0.61%	-0.07%
	TOTAL OUTPATIENT GOVERNMENT PAYER MIX	13.35%	13.73%	0.38%
	TOTAL OUTPATIENT PAYER MIX	32.56%	35.35%	2.79%
	TOTAL PAYER MIX BASED ON ACCRUED PAYMENTS	100.00%	100.00%	0.00%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
III. DISCHARGES, PATIENT DAYS, ALOS, CASE MIX INDEX AND OTHER REQUIRED DATA				
A. DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,407	6,089	(318)
2	MEDICARE	6,937	6,932	(5)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,672	6,004	332
4	MEDICAID	5,266	6,004	738
5	OTHER MEDICAL ASSISTANCE	406	0	(406)
6	CHAMPUS / TRICARE	28	33	5
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	311	262	(49)
	TOTAL GOVERNMENT DISCHARGES	12,637	12,969	332
	TOTAL DISCHARGES	19,044	19,058	14
B. PATIENT DAYS				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	24,833	25,520	687
2	MEDICARE	52,379	51,339	(1,040)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27,401	27,110	(291)
4	MEDICAID	25,153	27,110	1,957
5	OTHER MEDICAL ASSISTANCE	2,248	0	(2,248)
6	CHAMPUS / TRICARE	116	126	10
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,212	1,106	(106)
	TOTAL GOVERNMENT PATIENT DAYS	79,896	78,575	(1,321)
	TOTAL PATIENT DAYS	104,729	104,095	(634)
C. AVERAGE LENGTH OF STAY (ALOS)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	3.9	4.2	0.3
2	MEDICARE	7.6	7.4	(0.1)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4.8	4.5	(0.3)
4	MEDICAID	4.8	4.5	(0.3)
5	OTHER MEDICAL ASSISTANCE	5.5	0.0	(5.5)
6	CHAMPUS / TRICARE	4.1	3.8	(0.3)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	3.9	4.2	0.3
	TOTAL GOVERNMENT AVERAGE LENGTH OF STAY	6.3	6.1	(0.3)
	TOTAL AVERAGE LENGTH OF STAY	5.5	5.5	(0.0)
D. CASE MIX INDEX				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1.18277	1.22483	0.04206
2	MEDICARE	1.66225	1.61289	(0.04936)
0	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	1.01877	0.99749	(0.02128)
4	MEDICAID	1.00191	0.99749	(0.00442)
5	OTHER MEDICAL ASSISTANCE	1.23747	0.00000	(1.23747)
6	CHAMPUS / TRICARE	1.04640	0.87963	(0.16677)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1.18285	1.14876	(0.03409)
	TOTAL GOVERNMENT CASE MIX INDEX	1.37207	1.32612	(0.04594)
	TOTAL CASE MIX INDEX	1.30838	1.29376	(0.01462)
E. OTHER REQUIRED DATA				
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$349,741,731	\$401,607,588	\$51,865,857
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$135,799,425	\$113,130,118	(\$22,669,307)
	(PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)			
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$213,942,306	\$288,477,470	\$74,535,164
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	61.17%	71.83%	10.66%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,451,547	\$1,626,157	\$174,610
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,011,938	\$1,113,987	\$102,049
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT-OHCA INPUT)	\$2,988,794	\$0	(\$2,988,794)
8	CHARITY CARE	\$12,024,692	\$13,664,086	\$1,639,394
9	BAD DEBTS	\$25,581,567	\$28,215,688	\$2,634,121
10	TOTAL UNCOMPENSATED CARE	\$37,606,259	\$41,879,774	\$4,273,515
11	TOTAL OTHER OPERATING REVENUE	\$349,741,731	\$401,607,588	\$51,865,857
12	TOTAL OPERATING EXPENSES	\$350,215,000	\$383,278,000	\$33,063,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
IV. DSH UPPER PAYMENT LIMIT CALCULATIONS				
A. CASE MIX ADJUSTED DISCHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	7,578.00739	7,457.98987	(120.01752)
2	MEDICARE	11,531.02825	11,180.55348	(350.47477)
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	5,778.47088	5,988.92996	210.45908
4	MEDICAID	5,276.05806	5,988.92996	712.87190
5	OTHER MEDICAL ASSISTANCE	502.41282	0.00000	(502.41282)
6	CHAMPUS / TRICARE	29.29920	29.02779	(0.27141)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	367.86635	300.97512	(66.89123)
	TOTAL GOVERNMENT CASE MIX ADJUSTED DISCHARGES	17,338.79833	17,198.51123	(140.28710)
	TOTAL CASE MIX ADJUSTED DISCHARGES	24,916.80572	24,656.50110	(260.30462)
B. OUTPATIENT EQUIVALENT DISCHARGES CALCULATION (REVENUE METHODOLOGY)				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,829.99263	7,054.43495	224.44232
2	MEDICARE	2,392.96087	2,839.36263	446.40175
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	4,884.52507	5,344.95983	460.43475
4	MEDICAID	4,486.44076	5,344.95983	858.51907
5	OTHER MEDICAL ASSISTANCE	398.08431	0.00000	-398.08431
6	CHAMPUS / TRICARE	24.43162	42.42386	17.99224
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	993.36733	879.71824	-113.64910
	TOTAL GOVERNMENT OUTPATIENT EQUIVALENT DISCHARGES	7,301.91757	8,226.74631	924.82875
	TOTAL OUTPATIENT EQUIVALENT DISCHARGES	14,131.91020	15,281.18126	1,149.27106
C. INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$11,366.80	\$12,840.74	\$1,473.93
2	MEDICARE	\$9,456.19	\$10,436.92	\$980.73
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$6,629.79	\$7,669.14	\$1,039.35
4	MEDICAID	\$6,965.59	\$7,669.14	\$703.54
5	OTHER MEDICAL ASSISTANCE	\$3,103.36	\$0.00	(\$3,103.36)
6	CHAMPUS / TRICARE	\$2,848.41	\$5,601.46	\$2,753.05
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,588.93	\$9,205.87	\$6,616.94
	TOTAL GOVERNMENT INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$8,503.08	\$9,464.95	\$961.87
	TOTAL INPATIENT PAYMENT PER CASE MIX ADJUSTED DISCHARGE	\$9,374.03	\$10,486.04	\$1,112.01
D. OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$9,741.47	\$12,256.82	\$2,515.35
2	MEDICARE	\$9,196.69	\$9,742.10	\$545.41
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	\$4,927.72	\$5,061.11	\$133.39
4	MEDICAID	\$5,040.37	\$5,061.11	\$20.74
5	OTHER MEDICAL ASSISTANCE	\$3,658.12	\$0.00	(\$3,658.12)
6	CHAMPUS / TRICARE	\$6,921.81	\$4,905.97	(\$2,015.84)
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$2,352.04	\$2,759.58	\$407.55
	TOTAL GOVERNMENT OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$6,333.40	\$6,675.90	\$342.49
	TOTAL OUTPATIENT PAYMENT PER OUTPATIENT EQUIVALENT DISCHARGE	\$7,980.53	\$9,252.29	\$1,271.75

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
V. CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)				
1	MEDICAID	\$18,647,092	\$25,019,701	\$6,372,609
2	OTHER MEDICAL ASSISTANCE	\$5,396,562	\$0	(\$5,396,562)
3	UNINSURED (INCLUDED IN NON-GOVERNMENT)	\$9,325,488	\$6,513,162	(\$2,812,326)
	TOTAL CALCULATED UNDERPAYMENT (UPPER LIMIT METHODOLOGY)	\$33,369,142	\$31,532,863	(\$1,836,280)
VI. CALCULATED UNDERPAYMENT BEFORE UPPER LIMIT (BASELINE METHODOLOGY)				
1	TOTAL CHARGES	\$1,185,589,696	\$1,300,539,601	\$114,949,905
2	TOTAL GOVERNMENT DEDUCTIONS	\$586,704,949	\$622,199,899	\$35,494,950
3	UNCOMPENSATED CARE	\$37,606,259	\$41,879,774	\$4,273,515
4	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$213,942,306	\$288,477,470	\$74,535,164
5	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,011,938	\$1,113,987	\$102,049
6	TOTAL ADJUSTMENTS	\$839,265,452	\$953,671,130	\$114,405,678
7	TOTAL ACCRUED PAYMENTS	\$346,324,244	\$346,868,471	\$544,227
8	UCP DSH PAYMENTS (OHCA INPUT)	\$2,988,794	\$0	(\$2,988,794)
9	NET REVENUE USED TO DETERMINE DSH FUTURE PAYMENTS	\$349,313,038	\$346,868,471	(\$2,444,567)
10	RATIO OF NET REVENUE TO TOTAL CHARGES	0.2946323160	0.2667111949	(0.0279211211)
11	COST OF UNCOMPENSATED CARE	\$11,080,019	\$11,169,805	\$89,785
12	MEDICAL ASSISTANCE UNDERPAYMENT	\$29,366,093	\$16,747,991	(\$12,618,101)
13	PLUS OHCA ADJUSTMENT (OHCA INPUT)	\$0	\$0	\$0
14	TOTAL COST OF UNCOMPENSATED CARE AND MEDICAL ASSISTANCE UNDERPAYMENT	\$40,446,112	\$27,917,796	(\$12,528,316)
VII. RATIOS				
A. RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	43.92%	44.88%	0.96%
2	MEDICARE	31.37%	32.79%	1.43%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	22.93%	25.81%	2.88%
4	MEDICAID	24.19%	25.81%	1.62%
5	OTHER MEDICAL ASSISTANCE	10.29%	0.00%	-10.29%
6	CHAMPUS / TRICARE	10.70%	19.77%	9.07%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	9.85%	28.07%	18.22%
	TOTAL GOVERNMENT RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	28.60%	30.45%	1.85%
	TOTAL RATIO OF INPATIENT PAYMENTS TO INPATIENT CHARGES	32.82%	34.56%	1.74%
B. RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES				
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	31.82%	34.97%	3.15%
2	MEDICARE	18.35%	18.98%	0.63%
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	16.68%	17.07%	0.39%
4	MEDICAID	17.47%	17.07%	-0.40%
5	OTHER MEDICAL ASSISTANCE	9.80%	0.00%	-9.80%
6	CHAMPUS / TRICARE	24.85%	19.69%	-5.16%
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	7.56%	7.32%	-0.24%
	TOTAL GOVERNMENT RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	17.46%	17.99%	0.53%
	TOTAL RATIO OF OUTPATIENT PAYMENTS TO OUTPATIENT CHARGES	23.79%	25.59%	1.80%

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 550 - CALCULATION OF DSH UPPER PAYMENT LIMIT AND				
BASELINE UNDERPAYMENT DATA				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE
VIII. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS				
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	TOTAL ACCRUED PAYMENTS	\$346,351,008	\$399,934,985	\$53,583,977
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$2,988,794	\$0	(\$2,988,794)
	OHCA DEFINED NET REVENUE	\$349,339,802	\$399,934,985	\$50,595,183
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$9,722,198	\$9,679,611	(\$42,587)
4	CALCULATED NET REVENUE	\$359,062,000	\$409,614,596	\$50,552,596
5	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$359,062,000	\$409,615,000	\$50,553,000
6	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	(\$404)	(\$404)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED GROSS REVENUE	\$1,185,589,696	\$1,300,539,601	\$114,949,905
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0	\$0	\$0
	CALCULATED GROSS REVENUE	\$1,185,589,696	\$1,300,539,601	\$114,949,905
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,185,590,000	\$1,300,540,000	\$114,950,000
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$304)	(\$399)	(\$95)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS				
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$37,606,259	\$41,879,774	\$4,273,515
2	PLUS OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0	\$0	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$37,606,259	\$41,879,774	\$4,273,515
3	UNCOMP. CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$37,606,259	\$41,879,774	\$4,273,515
4	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0	\$0	\$0

BRIDGEPORT HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
I. ACCRUED CHARGES AND PAYMENTS		
A. INPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$213,400,151
2	MEDICARE	355,841,758
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	177,982,732
4	MEDICAID	177,982,732
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	822,407
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	9,870,815
	TOTAL INPATIENT GOVERNMENT CHARGES	\$534,646,897
	TOTAL INPATIENT CHARGES	\$748,047,048
B. OUTPATIENT ACCRUED CHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$247,235,586
2	MEDICARE	145,753,576
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	158,446,128
4	MEDICAID	158,446,128
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	1,057,263
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	33,143,267
	TOTAL OUTPATIENT GOVERNMENT CHARGES	\$305,256,967
	TOTAL OUTPATIENT CHARGES	\$552,492,553
C. TOTAL ACCRUED CHARGES		
1	TOTAL NON-GOVERNMENT ACCRUED CHARGES (INCLUDING SELF PAY / UNINSURED)	\$460,635,737
2	TOTAL GOVERNMENT ACCRUED CHARGES	839,903,864
	TOTAL ACCRUED CHARGES	\$1,300,539,601
D. INPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$95,766,076
2	MEDICARE	116,690,530
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	45,929,919
4	MEDICAID	45,929,919
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	162,598
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,770,737
	TOTAL INPATIENT GOVERNMENT PAYMENTS	\$162,783,047
	TOTAL INPATIENT PAYMENTS	\$258,549,123
E. OUTPATIENT ACCRUED PAYMENTS		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	\$86,464,944
2	MEDICARE	27,661,355
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	27,051,433
4	MEDICAID	27,051,433
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	208,130
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	2,427,657
	TOTAL OUTPATIENT GOVERNMENT PAYMENTS	\$54,920,918
	TOTAL OUTPATIENT PAYMENTS	\$141,385,862
F. TOTAL ACCRUED PAYMENTS		
1	TOTAL NON-GOVERNMENT ACCRUED PAYMENTS (INCLUDING SELF PAY / UNINSURED)	\$182,231,020
2	TOTAL GOVERNMENT ACCRUED PAYMENTS	217,703,965
	TOTAL ACCRUED PAYMENTS	\$399,934,985

BRIDGEPORT HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
II. ACCRUED DISCHARGES, CASE MIX INDEX AND OTHER REQUIRED DATA		
A. ACCRUED DISCHARGES		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	6,089
2	MEDICARE	6,932
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	6,004
4	MEDICAID	6,004
5	OTHER MEDICAL ASSISTANCE	0
6	CHAMPUS / TRICARE	33
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	262
	TOTAL GOVERNMENT DISCHARGES	12,969
	TOTAL DISCHARGES	19,058
B. CASE MIX INDEX		
1	NON-GOVERNMENT (INCLUDING SELF PAY / UNINSURED)	1,22483
2	MEDICARE	1,61289
3	MEDICAL ASSISTANCE (INCLUDING OTHER MEDICAL ASSISTANCE)	0,99749
4	MEDICAID	0,99749
5	OTHER MEDICAL ASSISTANCE	0,00000
6	CHAMPUS / TRICARE	0,87963
7	UNINSURED (INCLUDED IN NON-GOVERNMENT)	1,14876
	TOTAL GOVERNMENT CASE MIX INDEX	1,32612
	TOTAL CASE MIX INDEX	1,29376
C. OTHER REQUIRED DATA		
1	TOTAL CHARGES ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$401,607,588
2	ACCRUED PAYMENTS ASSOCIATED WITH NON-GOVERNMENT CONTRACTUAL ALLOWANCES (PRIOR TO ANY REDUCTION FOR UNCOMPENSATED CARE)	\$113,130,118
3	TOTAL NON-GOVERNMENT CONTRACTUAL ALLOWANCES	\$288,477,470
4	TOTAL ACTUAL DISCOUNT PERCENTAGE	71.83%
5	EMPLOYEE SELF INSURANCE GROSS REVENUE	\$1,626,157
6	EMPLOYEE SELF INSURANCE ALLOWANCE	\$1,113,987
7	UCP DSH PAYMENTS (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJUSTMENT - OHCA INPUT)	\$0
8	CHARITY CARE	\$13,664,086
9	BAD DEBTS	\$28,215,688
10	TOTAL UNCOMPENSATED CARE	\$41,879,774
11	TOTAL OTHER OPERATING REVENUE	\$5,964,831
12	TOTAL OPERATING EXPENSES	\$383,278,000

BRIDGEPORT HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 600 - SUMMARY OF DSH UPPER PAYMENT LIMIT AND BASELINE UNDERPAYMENT DATA: AGREED-UPON PROCEDURES		
(1)	(2)	(3)
LINE	DESCRIPTION	ACTUAL FY 2011
III. NET REVENUE, GROSS REVENUE AND UNCOMPENSATED CARE RECONCILIATIONS		
A. RECONCILIATION OF OHCA DEFINED NET REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	TOTAL ACCRUED PAYMENTS	\$399,934,985
2	PLUS DSH PAYMENTS RECEIVED (GROSS DSH PAYMENTS PLUS UPPER LIMIT ADJ.) (OHCA INPUT)	\$0
	OHCA DEFINED NET REVENUE	\$399,934,985
3	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED NET REVENUE	\$9,679,611
	CALCULATED NET REVENUE	\$409,614,596
4	NET REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$409,615,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$404)
B. RECONCILIATION OF OHCA DEFINED GROSS REVENUE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED GROSS REVENUE	\$1,300,539,601
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED GROSS REVENUE	\$0
	CALCULATED GROSS REVENUE	\$1,300,539,601
3	GROSS REVENUE FROM HOSPITAL AUDITED FINANCIAL STATEMENTS (FROM ANNUAL REPORTING)	\$1,300,540,000
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	(\$399)
C. RECONCILIATION OF OHCA DEFINED UNCOMP. CARE TO HOSPITAL AUDITED FIN. STATEMENTS		
1	OHCA DEFINED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$41,879,774
2	PLUS/(MINUS) OTHER ADJUSTMENTS TO OHCA DEFINED UNCOMPENSATED CARE	\$0
	CALCULATED UNCOMPENSATED CARE (CHARITY CARE AND BAD DEBTS)	\$41,879,774
3	UNCOMPENSATED CARE FROM HOSPITAL AUDITED FIN. STATEMENTS (FROM ANNUAL REPORTING)	\$41,879,774
	VARIANCE (MUST BE LESS THAN OR EQUAL TO \$500)	\$0

BRIDGEPORT HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 650 - HOSPITAL UNCOMPENSATED CARE					
(1)	(2)	(3)	(4)	(5)	(6)
LINE	DESCRIPTION	ACTUAL FY 2010	ACTUAL FY 2011	AMOUNT DIFFERENCE	% DIFFERENCE
A. Hospital Charity Care (from HRS Report 500)					
1	Number of Applicants	1,806	1,817	11	1%
2	Number of Approved Applicants	1,147	1,127	(20)	-2%
3	Total Charges (A)	\$12,024,692	\$13,664,086	\$1,639,394	14%
4	Average Charges	\$10,484	\$12,124	\$1,641	16%
5	Ratio of Cost to Charges (RCC)	0.315690	0.293948	(0.021742)	-7%
6	Total Cost	\$3,796,075	\$4,016,531	\$220,456	6%
7	Average Cost	\$3,310	\$3,564	\$254	8%
8	Charity Care - Inpatient Charges	\$588,008	\$660,127	\$72,119	12%
9	Charity Care - Outpatient Charges (Excludes ED Charges)	7,254,496	9,467,956	2,213,460	31%
10	Charity Care - Emergency Department Charges	4,182,188	3,536,003	(646,185)	-15%
11	Total Charges (A)	\$12,024,692	\$13,664,086	\$1,639,394	14%
12	Charity Care - Number of Patient Days	2,532	2,064	(468)	-18%
13	Charity Care - Number of Discharges	379	359	(20)	-5%
14	Charity Care - Number of Outpatient ED Visits	1,413	1,748	335	24%
15	Charity Care - Number of Outpatient Visits (Excludes ED Visits)	4,732	5,324	592	13%
B. Hospital Bad Debts (from HRS Report 500)					
1	Bad Debts - Inpatient Services	\$1,250,939	\$1,363,132	\$112,193	9%
2	Bad Debts - Outpatient Services (Excludes ED Bad Debts)	15,433,359	19,550,878	4,117,519	27%
3	Bad Debts - Emergency Department	8,897,269	7,301,678	(1,595,591)	-18%
4	Total Bad Debts (A)	\$25,581,567	\$28,215,688	\$2,634,121	10%
C. Hospital Uncompensated Care (from HRS Report 500)					
1	Charity Care (A)	\$12,024,692	\$13,664,086	\$1,639,394	14%
2	Bad Debts (A)	25,581,567	28,215,688	2,634,121	10%
3	Total Uncompensated Care (A)	\$37,606,259	\$41,879,774	\$4,273,515	11%
4	Uncompensated Care - Inpatient Services	\$1,838,947	\$2,023,259	\$184,312	10%
5	Uncompensated Care - Outpatient Services (Excludes ED Unc. Care)	22,687,855	29,018,834	6,330,979	28%
6	Uncompensated Care - Emergency Department	13,079,457	10,837,681	(2,241,776)	-17%
7	Total Uncompensated Care (A)	\$37,606,259	\$41,879,774	\$4,273,515	11%
(A) The amount must agree with the amount listed on Hospital Reporting System - Report 500.					

BRIDGEPORT HOSPITAL TWELVE MONTHS ACTUAL FILING FISCAL YEAR 2011 REPORT 685 - HOSPITAL NON-GOVERNMENT GROSS REVENUE, CONTRACTUAL ALLOWANCES, ACCRUED PAYMENTS AND DISCOUNT PERCENTAGE					
(1)	(2)	(3) FY 2010	(4) FY 2011	(5)	(6)
<u>LINE</u>	<u>DESCRIPTION</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>ACTUAL TOTAL NON-GOVERNMENT</u>	<u>AMOUNT DIFFERENCE</u>	<u>% DIFFERENCE</u>
	<u>COMMERCIAL - ALL PAYERS</u>				
1	Total Gross Revenue	\$349,741,731	\$401,607,588	\$51,865,857	15%
2	Total Contractual Allowances	\$213,942,306	\$288,477,470	\$74,535,164	35%
	Total Accrued Payments (A)	\$135,799,425	\$113,130,118	(\$22,669,307)	-17%
	Total Discount Percentage	61.17%	71.83%	10.66%	17%
(A) Accrued Payments associated with Non-Government Contractual Allowances must exclude any reduction for Uncompensated Care.					

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
A. <u>Gross and Net Revenue</u>				
1	Inpatient Gross Revenue	\$686,097,894	\$711,617,325	\$748,047,048
2	Outpatient Gross Revenue	\$419,436,609	\$473,972,371	\$552,492,553
3	Total Gross Patient Revenue	\$1,105,534,503	\$1,185,589,696	\$1,300,539,601
4	Net Patient Revenue	\$349,484,000	\$359,062,000	\$409,615,000
B. <u>Total Operating Expenses</u>				
1	Total Operating Expense	\$351,055,000	\$350,215,000	\$383,278,000
C. <u>Utilization Statistics</u>				
1	Patient Days	103,601	104,729	104,095
2	Discharges	19,808	19,044	19,058
3	Average Length of Stay	5.2	5.5	5.5
4	Equivalent (Adjusted) Patient Days (EPD)	166,936	174,484	180,977
0	Equivalent (Adjusted) Discharges (ED)	31,917	31,728	33,134
D. <u>Case Mix Statistics</u>				
1	Case Mix Index	1.26697	1.30838	1.29376
2	Case Mix Adjusted Patient Days (CMAPD)	131,260	137,025	134,674
3	Case Mix Adjusted Discharges (CMAD)	25,096	24,917	24,657
4	Case Mix Adjusted Equivalent Patient Days (CMAEPD)	211,504	228,291	234,142
5	Case Mix Adjusted Equivalent Discharges (CMAED)	40,438	41,513	42,867
E. <u>Gross Revenue Per Statistic</u>				
1	Total Gross Revenue per Patient Day	\$10,671	\$11,321	\$12,494
2	Total Gross Revenue per Discharge	\$55,813	\$62,255	\$68,241
3	Total Gross Revenue per EPD	\$6,623	\$6,795	\$7,186
4	Total Gross Revenue per ED	\$34,637	\$37,367	\$39,251
5	Total Gross Revenue per CMAEPD	\$5,227	\$5,193	\$5,554
6	Total Gross Revenue per CMAED	\$27,339	\$28,560	\$30,339
7	Inpatient Gross Revenue per EPD	\$4,110	\$4,078	\$4,133
8	Inpatient Gross Revenue per ED	\$21,496	\$22,429	\$22,577

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
F. Net Revenue Per Statistic				
1	Net Patient Revenue per Patient Day	\$3,373	\$3,428	\$3,935
2	Net Patient Revenue per Discharge	\$17,644	\$18,854	\$21,493
3	Net Patient Revenue per EPD	\$2,094	\$2,058	\$2,263
4	Net Patient Revenue per ED	\$10,950	\$11,317	\$12,362
5	Net Patient Revenue per CMAEPD	\$1,652	\$1,573	\$1,749
6	Net Patient Revenue per CMAED	\$8,642	\$8,649	\$9,555
G. Operating Expense Per Statistic				
1	Total Operating Expense per Patient Day	\$3,389	\$3,344	\$3,682
2	Total Operating Expense per Discharge	\$17,723	\$18,390	\$20,111
3	Total Operating Expense per EPD	\$2,103	\$2,007	\$2,118
4	Total Operating Expense per ED	\$10,999	\$11,038	\$11,568
5	Total Operating Expense per CMAEPD	\$1,660	\$1,534	\$1,637
6	Total Operating Expense per CMAED	\$8,681	\$8,436	\$8,941
H. Nursing Salary and Fringe Benefits Expense				
1	Nursing Salary Expense	\$42,767,886	\$48,504,672	\$50,710,790
2	Nursing Fringe Benefits Expense	\$10,711,918	\$11,454,118	\$11,626,907
3	Total Nursing Salary and Fringe Benefits Expense	\$53,479,804	\$59,958,790	\$62,337,697
I. Physician Salary and Fringe Expense				
1	Physician Salary Expense	\$8,311,122	\$9,466,788	\$13,924,825
2	Physician Fringe Benefits Expense	\$2,452,306	\$2,213,435	\$955,279
3	Total Physician Salary and Fringe Benefits Expense	\$10,763,428	\$11,680,223	\$14,880,104
J. Non-Nursing, Non-Physician Salary and Fringe Benefits Expense				
1	Non-Nursing, Non-Physician Salary Expense	\$79,408,992	\$70,911,540	\$75,549,385
2	Non-Nursing, Non-Physician Fringe Benefits Expense	\$25,392,776	\$28,140,447	\$34,400,814
3	Total Non-Nurs., Non-Phys. Salary and Fringe Ben. Expense	\$104,801,768	\$99,051,987	\$109,950,199
K. Total Salary and Fringe Benefits Expense				
1	Total Salary Expense	\$130,488,000	\$128,883,000	\$140,185,000
2	Total Fringe Benefits Expense	\$38,557,000	\$41,808,000	\$46,983,000
3	Total Salary and Fringe Benefits Expense	\$169,045,000	\$170,691,000	\$187,168,000

BRIDGEPORT HOSPITAL				
TWELVE MONTHS ACTUAL FILING				
FISCAL YEAR 2011				
REPORT 700 - STATISTICAL ANALYSIS OF HOSPITAL REVENUE AND EXPENSE				
(1)	(2)	(3)	(4)	(5)
LINE	DESCRIPTION	ACTUAL FY 2009	ACTUAL FY 2010	ACTUAL FY 2011
L.	Total Full Time Equivalent Employees (FTEs)			
1	Total Nursing FTEs	566.6	571.6	580.1
2	Total Physician FTEs	129.7	139.8	135.9
3	Total Non-Nursing, Non-Physician FTEs	1343.2	1304.0	1369.9
4	Total Full Time Equivalent Employees (FTEs)	2,039.5	2,015.4	2,085.9
M.	Nursing Salaries and Fringe Benefits Expense per FTE			
1	Nursing Salary Expense per FTE	\$75,482	\$84,858	\$87,417
2	Nursing Fringe Benefits Expense per FTE	\$18,906	\$20,039	\$20,043
3	Total Nursing Salary and Fringe Benefits Expense per FTE	\$94,387	\$104,896	\$107,460
N.	Physician Salary and Fringe Expense per FTE			
1	Physician Salary Expense per FTE	\$64,080	\$67,717	\$102,464
2	Physician Fringe Benefits Expense per FTE	\$18,908	\$15,833	\$7,029
3	Total Physician Salary and Fringe Benefits Expense per FTE	\$82,987	\$83,550	\$109,493
O.	Non-Nursing, Non-Physician Salaries and Fringe Benefits Expense per FTE			
1	Non-Nursing, Non-Physician Salary Expense per FTE	\$59,119	\$54,380	\$55,150
2	Non-Nursing, Non-Physician Fringe Benefits Expense per FTE	\$18,905	\$21,580	\$25,112
3	Total Non-Nurs., Non-Phys. Sal. and Fringe Ben. Exp. per FTE	\$78,024	\$75,960	\$80,261
P.	Total Salary and Fringe Benefits Expense per FTE			
1	Total Salary Expense per FTE	\$63,980	\$63,949	\$67,206
2	Total Fringe Benefits Expense per FTE	\$18,905	\$20,744	\$22,524
3	Total Salary and Fringe Benefits Expense per FTE	\$82,886	\$84,693	\$89,730
Q.	Total Salary and Fringe Ben. Expense per Statistic			
1	Total Salary and Fringe Benefits Expense per Patient Day	\$1,632	\$1,630	\$1,798
2	Total Salary and Fringe Benefits Expense per Discharge	\$8,534	\$8,963	\$9,821
3	Total Salary and Fringe Benefits Expense per EPD	\$1,013	\$978	\$1,034
4	Total Salary and Fringe Benefits Expense per ED	\$5,296	\$5,380	\$5,649
5	Total Salary and Fringe Benefits Expense per CMAEPD	\$799	\$748	\$799
6	Total Salary and Fringe Benefits Expense per CMAED	\$4,180	\$4,112	\$4,366